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AUTHOR	Kahn, Alfred J.; Kamerman, Sheila B.
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ABSTRACT

This booklet presents the results of a survey of child care programs in nine countries: Canada, France, The Federal Republic of Germany, Israel, Poland, Sweden, the United Kingdom, the United States, and Yugoslavia. Data (prepared in 1974) was assembled for each of the countries by researchers in that country. Eleven facets of child care programs were evaluated: (1) the structure of child care programs, (2) social and welfare supports for child care arrangements, (3) the size and coverage of child care programs, (4) child care program eligibility and financing, (5) goals and purposes of child care programs, (6) major program forms or models, (7) geographical distribution of facilities, (8) staffing of child care programs, (9) standards for child care programs, (10) research and evaluation, and (11) current issues in child care. Data tables are included. (BRT)

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Child Care Programs in Nine Countries

PS 008479

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Alfred J. Kahn
Sheila B. Kamerman

CHILD-CARE PROGRAMS IN NINE COUNTRIES

A Report Prepared for the OECD Working Party
on the Role of Women in the Economy

Cross-National Studies of Social Service Systems
Columbia University School of Social Work, New York

Alfred J. Kahn, Project Director
Sheila B. Kamerman, Associate Director

U.S. Department of Health, Education, and Welfare
Office of Human Development/Office of Child Development
Research and Evaluation Division

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FOREWORD

("Child Care Programs in Nine Countries")

This report appears at a very strategic moment in the United States. We are actively involved in examining our child care commitment and are debating multiple options. The Office of Child Development and other federal agencies are encouraging relevant research and evaluation, which would help clarify options for more effective child care programs. Researchers are giving particular priority to ways of measuring socio-emotional, as well as cognitive effects of child care programs and the interrelations among program and staff components, on the one hand, and impact on the other. Some policy makers and interest groups are devoting special attention to the administrative auspices for future program expansion. Others ask whether expansion of child care programs is wise social policy or good economics.

The Columbia University School of Social Work's Cross-National Studies of Social Service Systems were initiated within the Social and Rehabilitation Services (SRS), Department of Health, Education, and Welfare, and funded by SRS, OCD, and the National Institute of Mental Health (NIMH). They had supplementary aid in several of the participating countries. While the foreign research work was sponsored by SRS, OCD was particularly pleased to fund the United States phase of the study of children's programs and the overall analytic work for this particular Report. To learn about what other countries do -- and why -- and how they feel about it -- and to gain insight into the issues confronted and debated elsewhere, does not tell us what the U.S. should do. It does, however, help focus our discussion and research as well as to stimulate the consideration of alternatives.

In this latter connection, we are fascinated and challenged by this Report's conclusion that policy development and programming require consideration, at one and the same time, of all arrangements for daytime care of children below compulsory school age. Our attention to the overall picture should not be constrained by whether the administrative mechanism is one or more departments or whether the department or bureau responsible is called education, health, labor, or social welfare. In fact, the administrative mechanism does not per se determine or predict: (1) the portion of the day covered; (2) the quality of the program or its philosophical orientation; or (3) whether in fact the program's objective or function is to care for the children of working mothers, to enhance development of the child, or both. Even in the United States, labels such as day care, nursery school, Head Start, or kindergarten do not fully differentiate program content and function.

With reference to the ongoing debate in the United States about administrative mechanisms and professional roles, we might comment that one possible conclusion is that there are clear grounds for diversity, and that the standards which are enforced and the guidelines which are encouraged may be the crucial issue. The experiences of other countries in addressing issues of auspice should help the United States clarify the issues and make decisions more beneficial to children who are or will be in child care programs.

The Cross-National Studies' Report on child care in nine countries was commissioned by OCD to serve the needs of the Working Party on the Role of Women in the Economy of the Organization for Economic Cooperation and Development (OECD), which met in Paris in December, 1975. The perspectives presented in this document are relevant to the U.S. discussions and concerns today. OCD is therefore pleased to make it available to the American audience now.

John H. Meier

John H. Meier, Ph.D.
Director
Office of Child Development

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This report prepared at Columbia University with the financial support of the Office of Child Development, U.S. Department of Health, Education, and Welfare (OS(HEW)OCD-CB386) is the sole responsibility of the author and of the Cross-National Studies Project Director. It is based on work carried out by the following in the respective countries:

- Jacqueline Ancelin (France)
- Avraham Doron and Gilead Danziger (Israel)
- H. Philip Hepworth (Canada)
- Marianne Karre and Alfred J. Kahn (Sweden)
- Claudine McCreadie (United Kingdom)
  (Barbara Rodgers, Country Project Director)
- Jan Rosner (Poland)
- Juergen Plaschke (Federal Republic of Germany)
  (Dieter Schaefer, Country Project Director)
- Alfred J. Kahn and Brenda McGowan (United States)
- Vitomir Stojaković (Yugoslavia)

I

MAJOR TRENDS AND PATTERNS: AN OVERVIEW

The inclusion in one report of material relevant both to day care and to preschool programs violates administrative and planning practice in a number of countries; nonetheless, it is the only way to achieve a viable overview. Preschool programs serve as child care where mothers work part time and are in some instances the vehicle for all-day care as well, whether through all-day programs or through supplementation by other provision, usually or often at the same location. Day care, on the other hand, is at times part-time and is not programmatically recognizable as different from preschool programs, except in its administrative auspices. Nor is program content distinctive between the two systems as one examines the inter-country variations.

There are mothers at home, mothers at work, part-time working mothers, full-time working mothers. There are preschool programs and day-care facilities under education, welfare, and health auspices. There are many types of program content. They are combined and distributed in different ways in the various countries studied. The only way to have a coherent policy or programming discussion is to assemble all these facts and face them in their implications.*

Preschool coverage (part-day and/or full-day) is already very extensive in most countries studied. Projected plans stress universal coverage, on a voluntary basis, for all children between the ages of 3 (approximate) and compulsory school age. At present, the *demand* for preschool programs far exceeds that for programs for children under age 3, and the highest rate of usage of existing preschool programs is by middle-class children.**

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*While still atypical in some countries, the perspective employed in this report is not unique. A growing number of international studies and reports on child care reflect a similar perspective. In particular, the International Monograph Series on Early Child Care (London: Gordon and Breach, 1973-76) edited by Halbert B. Robinson and Nancy M. Robinson; the I.L.O. report, *Equality of Opportunity and Treatment for Women Workers*; the British report, *Women and Work: Overseas Practice* (Department of Employment, Manpower Paper No. 12, London: HMSO, 1975); the French report, "La Famille et la Socialisation des Enfants" in Commissariat Général du Plan, *La Famille* (Paris: Hachette, 1975), 237-59.

**The following terms are used interchangeably:
(a) day care, crèche, nursery, day nursery;
(b) kindergarten, preschool, nursery school, école maternelle.
These two models and their variations are described in Section VIII.

Despite the expansion of formal, organized child-care arrangements (center and family) there continues to exist, in most of the countries covered, a considerable amount of unregulated, unlicensed, informally arranged, and usually uncounted family day care.

Where formal resources are in short supply - and this therefore means most programs in most countries, the single, major criterion for eligibility for such programs is: presumptive social need. Although the hierarchy of preference varies among countries, priority is given to the following categories of children:

(a) children of working mothers or full-time students;

(b) children of one-parent families;

(c) children of immigrant families;

(d) children of socially, economically, and/or culturally deprived or disadvantaged families;

(e) abused or neglected children.

Within all the preceding categories, priority is given to children from low-income families.

Most programs are universal and nonmeans tested although they may employ income criteria as the basis for sliding-fee schedules. Other than the publicly provided preschool educational programs in some countries, almost all programs involve some fee payment by parents.

The predominant goals in child-care programs are:

(a) for programs serving children under age 3: custodial - the care and protection of young children;*

(b) for programs serving children aged 3 and over: educational (and to a lesser extent social).

Structure: Day care and preschool are either two consecutive, age-related systems (0-3; 3-6), for the most part under separate ministries (welfare or health education), or two parallel systems with preschool beginning in the middle of the age cohort covered by day care (e.g., day care 0-6; kindergarten 3-6). Regardless, the general tendency is for there to be no coordination between the systems with consequent problems for children and families as well as for care providers. There is frequent contact between health services and child-care services, regardless of whether the child-care programs are in the health system or not, and the need for greater integration of health and child-care services is noted and acknowledged in all countries.

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*Note the use of this term as meaning "good quality care," not the pejorative use made by many in the U.S. to mean "only physical care and nothing else."

Financing: Most child-care programs are publicly funded, either directly or by purchase of service through voluntary agencies. In three of the four countries characterized by extensive voluntary-agency provision of care, there is also considerable provision under proprietary auspices.

The extent of public subsidy for child-care programs is very high in all countries, and there is no relationship between economic costs and even the maximum fee charged. Where fees are charged (in some preschool programs; in most day-care programs) fees range from low to lower. It is also worth noting that in those countries where proprietary care is prevalent, fees for such care are not much higher than the fees of nonprofit programs (and sometimes are lower). There are no hard data comparing quality of care, however, and no consistency regarding the basis for - or composition of - start-up or construction costs. However, a uniform characteristic of the operating costs of child-care programs in all countries is that 70-80 percent of the costs is attributed to expenditures for staff.

Apart from this it is difficult to compare costs of programs in different countries; yet, one other generalization regarding costs seems valid: The costs of family day care are never analyzed precisely and tend to be underestimated. (They often do not include rent, depreciation of facility and equipment, and replacement costs and assume very low wages for the family-day-care mother.)

Inequities in geographic distribution: No country has yet coped adequately with providing organized child-care programs in rural areas. Nor are there systematic approaches to differentiating need in urban and rural areas.

Staffing: There is inconsistency between countries and no consensus regarding the nature of training, qualifications for child-care staff, and ratio of staff to children in care.

Unmet need for care: Apart from preschool programs for children aged 3 and over, the major pressure for increased coverage, specifically identified in several countries, is supplementary child-care programs for school-aged children up to age 14: that is, before-and-after-school-hours programs, covering short and long school vacations for the children of working mothers.

II

INTRODUCTION

This is a report on child care in nine countries (Canada, France, Federal Republic of Germany, Israel, Poland, Sweden, United Kingdom, United States, Yugoslavia) prepared from data assembled in each of these countries by researchers in the country studied. Eight of the countries (all except Sweden) participated in a cross-national study of the personal social services (general social services, social-welfare services, social-work services) in which child care was one of the five service areas studied.* Data for Sweden were assembled as part of another study, describing social-service programs in Europe for average families.** The countries included in the larger study were selected for their range in social-service provision, both policy and program, and for their differences in governmental structure. Except for two, they are all advanced industrialized countries.

The individual country reports that provide the data on which this report is based were all prepared during 1974 and include the most current data available at that time. Data sources for these reports include government reports and documents and authoritative secondary sources.

A semistructured data-collection guide designed in the U.S., focused on policy and programming issues under discussion in the U.S., provided the basic framework for assembling data. It must be understood, however, that individual countries do not necessarily collect the same kinds of data, or maintain similar data series, or employ comparable typologies, or assign - or disaggregate - expenditures in similar manners. Within these constraints - the availability of data and the comparability of data - what follows is a description, comparison, and analysis of child care in nine countries.

We begin by noting that experts in each country have stressed similar trends and developments as providing context for current patterns of child care. In each country, the past decade (some time between the 1960s and early 1970s) is highlighted as a time of "demand explosion" with regard to "out-of-own-home" child care. With the exception of the U.S., where one factor leading to the expansion of day care during the 1960s was the assumption that such care would free public assistance mothers for work and training, the forces contributing to the expanded demand tend to be similar in all the countries under review. More specifically, they include:

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*Cross-National Studies of Social Service Systems, Columbia University School of Social Work, New York, N.Y.; several reports to appear in late 1975 and 1976.

**Alfred J. Kahn and Sheila B. Kamerman, Not For the Poor Alone: European Social Services (Philadelphia, Penn: Temple University Press, to be published, Fall, 1975).

(a) the increased numbers of women in the labor force; in particular, the increased numbers of women with children under the age of 6;

(b) the increased numbers of one-parent, female-headed families (characterized by a particularly high rate of labor-force participation);

(c) the decreased numbers of families living with or near relatives;

(d) growing concern regarding the increasing gap in levels of achievement in the primary grades between different groups of children, e.g., immigrant/native, rural/urban, poor/nonpoor, black/white (This development is reflected in the literature on the subject published in these countries during this period);

(e) the expanding interest in women's rights, "equality" and the possibility of maximizing choice for women.

III

THE STRUCTURE OF CHILD-CARE PROGRAMS

The primary focus in this report is on out-of-own-home, daytime, organized child care for children below compulsory school age. Some mention will be made, also, of alternative arrangements for child care (informal arrangements for out-of-own-home care; social-insurance benefits in support of parental care or nonparental in-own-home or out-of-own-home care; social services for in-own-home care) and for before-and-after-school-hours care for school children.

Compulsory education begins in the countries covered, as follows:

(a) age 5 - Israel, U.K.;

(b) age 6 - Canada, France, F. R. of Germany, U.S.;*

(c) age 7 - Poland, Sweden, Yugoslavia.

The structure of organized child care falls into two general patterns (with two exceptions). One pattern, characteristic of France, Poland, and Yugoslavia, involves two separate systems (welfare or health; education) with different orientations to age-related child care (for those under or over age 3; in France, there is overlap between age 2-3). These arrangements are largely under public auspices; policy is set by the central government while programs are administered and operated locally. The second pattern, characteristic of Canada, Israel, the U.K., and the U.S., is one in which two or more systems may be involved in child-care provision (welfare, health, labor, education); the systems are partially age-related; auspices are often proprietary or voluntary (not-for-profit) agencies rather than public agencies. In Canada, the provincial government plays the major role in setting policy while the local government (and/or voluntary agencies) operate programs; in Israel and the U.K. it is the central government that funds programs and sets policy, with programs operated by local authorities (public and/or voluntary); and in the U.S. it is mixed, with funding and policy largely, but not solely, from the central government, and multiple agencies at state and local levels administering and operating programs. For the most part there is little coordination among the responsible departments.

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*U.S. states set the compulsory age as 6 or 7 but, in practice, practically all children attend by age 6. Where we refer to U.S. we employ age 6.

Table 1

THE STRUCTURE OF CHILD CARE IN EACH COUNTRY(a)

(Number of Separate Child Care Systems by Major Structural Variations)

Country	No. of Systems	Age Related or Not	Auspice			Administrative Responsibility	Responsible Level of Gov't		
			Public	Voluntary	Proprietary		National	State(b)	Local
Canada	Two	Partially	Yes	Major	Major	Departments of: Welfare; Health; Education	Minor	Sets Policy	Implements Programs
France	Two	Yes Creche: 0-3; Ecole Maternelle: 2-6	Major	Yes	NONE	Ministries of: Health & Social Security; Education	Sets Policy	--	Implements Programs
Federal Republic of Germany	One	Yes Kindergarten: 3-6	Yes	Major	NONE	Federal Dept. of Youth Welfare Services; Voluntary Union of Youth Welfare Services	Minor	Sets Policy; Funds	Implements Programs
Israel	Two	Partially	Major	Major	Yes	Ministries of: Welfare; Labor; Education	Sets Policy	--	Implements Programs
Poland	Two	Yes Nursery: 6 wks-3 yrs; Kindergarten: 3-7	Major	Yes	NONE	Ministries of: Health & Welfare; Education	Sets Policy	--	Implements Programs
Sweden	One	Under 7	Major	Yes	Yes	Minister of Health & Social Affairs	Sets Policy	--	Implements Programs
United Kingdom	Two	Partially	Major	Yes	Yes	Departments of: Health & Social Security; Education	Sets Policy	--	Implements Programs
United States	Multiple	No	Yes	Major	Major	Departments of: Health, Education, & Welfare; Labor	Major Public Funding Source Sets Some Policy	Sets Some Policy; Multiple Agencies Administer	Implements Programs
Yugoslavia	Two	Yes Day Nursery: 0-4; Preschool: 4-7	Major	NONE	NONE	Jurisdictional Areas: Social Welfare; Education	Minor	Republic Sets Policy	Sets Some Policy Implements Programs

(a) The following terms are used interchangeably: (i) day care, crèche, nursery, day nursery; (ii) kindergarten, preschool, nursery school, école maternelle, nursery class

(b) For countries having a middle tier of government

The exceptions to these patterns include: Sweden, which has a single, integrated child-care system under public auspices, with policy set by the central government and programs developed and operated at the local level; and the F. R. of Germany, which has one system (mainly for children aged 3 and over) under the guidance of the Department of Social Affairs, with policy set at state and local levels and operations primarily under voluntary agency auspices. The specific details are as follows:

Canada

Canada has a fragmented system of child care, varying in auspices, extensiveness, and type of provision from province to province. The major types of arrangements are as follows:

Group or center day care and nursery school (technically for children up to age 14, but in fact for children under age 6) is provided under a wide range of auspices: "private, cooperative, church, voluntary social agency, public agency or a combination of these." Most are privately operated ventures (75 percent of the day-care centers and over 50 percent of the nursery schools). Seventeen percent of the day-care centers and 35 percent of the nursery schools are under public auspices (community nonprofit groups or municipal welfare departments). However, the public sector does play a more dominant role in operating centers with special needs. Little provision has been made by commerce or industry, although some interest is emerging on the part of large employers (federal government, universities). These programs in toto are primarily for children aged 3-5 (94 percent), although 12 percent of the enrollment of day-care centers are children under age 3.

The administration of day-care services comes within the jurisdiction of the provincial (state) governments, usually under departments of welfare. There is no consistent national pattern of service or of administration.

Formally arranged family day care is still of limited importance.

Kindergarten (or preschool) is under the jurisdiction of provincial departments of education and local school boards as part of the public school system, for 4-6 year olds. Provision here varies both among the provinces and within provinces over time.

There is little coordination among the centers or between day-care centers and kindergartens; nor are there formal linkages with other categories of service.

France

France has two very extensive systems of child care, both responsible to ministries of the central government:

(a) crèche (or day care) - an all-day center or family program, under the Ministry of Public Health and Social Security, for children under the age of 3;

(b) école maternelle (or preschool) - a full-day program, under the Ministry of National Education, for children aged 2-6.

Outdoor and recreation centers, under the Ministry of Youth and Sports, provide programs for before- and after-school hours for the over-6 year olds.

Although the central government and the major national quasi-public agency have the major role in funding and establishing policy for all types of organized child care, local government (municipalities, local communities) has a major role in the administration and operation of such centers, and, with regard to outdoor and recreation centers, also participates in the financing.

Federal Republic of Germany

The F. R. of Germany has one major system of organized child care, the kindergarten or preschool, for children aged 3-6. There are few "day nurseries" (crèches or day-care centers) for infants and children under the age of 3, although there is growing pressure for providing such care for the approximately 700,000 working mothers with about 800,000 children under 6. Experimentation with the use of family day care has been initiated within the past year.

At the federal level the ministry involved is the Ministry of Youth, Family and Health, in particular the Youth Welfare service. However, primary responsibility for the kindergarten system is carried at the state and local levels. At the state level administrative responsibility varies between the Ministry of Culture and the Ministry of Social Affairs. Also involved at state and local levels are the Voluntary Unions of Youth Welfare services. Provision varies among the 11 individual Laende (states), depending on the variations in legislation. About 75 percent of the kindergartens are operated by voluntary welfare associations.

The F. R. of Germany also has a program of "daytime hostels and youth clubs" for before- and after-school care and instruction, established because the school program is a half-day program only. (Administrative and policy responsibility are distributed as in the preceding description). However, this program is described as "of minor importance as a child-care system" for school-age children.

Israel

Israel has two different systems of organized child care involving three separate national ministries. They are distinguished partly by function and partly by age. In addition there are a large number of proprietary kindergartens that are subject to governmental regulations and control. The formal child-care "system," in which a very extensive kindergarten or preschool program is predominant, includes the following:

(a) day-care centers of various kinds for children aged 1-3, with the Ministry of Social Welfare responsible for the development of this system, whose primary function is to prevent - or to compensate for - cultural deprivation in "backward sectors of the population";

(b) day-care centers for children aged 1-5, established with the assistance of the Ministry of Labor, for the specific purpose of enabling more mothers to work;

(c) kindergartens for children aged 3 up to the age of compulsory education at age 5, with the Ministry of Education responsible for this system, which is supposed to be a preschool program for culturally deprived children.

Coordination of these two systems involving three ministries is in the hands of a permanent inter-ministerial committee which consists of representatives of the three ministries and a representative of the treasury's budget division. Policy making and the responsibility for policy implementation are the tasks of the national government; however, program implementation (initiating, planning, establishing, operating, and maintaining centers and kindergartens) is the role of local authorities as well as voluntary women's organizations.

Ninety percent of the day-care centers are owned and operated by these voluntary organizations; only 6 percent are under public auspices (local authorities).

In contrast, over 90 percent of the kindergartens are under public auspices (74 percent under local authorities alone) and only 9 percent operated by voluntary women's organizations. In addition, a little less than one third of all children attending kindergarten attended a privately operated (proprietary) program.

There is an extensive and varied publicly sponsored and operated program for before- and after-school hours.

Poland

There are two systems of child care in Poland. These are specifically age-related: (1) nursery, or crèche, for children aged 6 weeks to 3 years, under the responsibility of the Ministry of Health and Social Welfare; (2) kindergarten, or preschool, for children aged 3-7, under the Ministry of Education. Policy is established at the national level;

however, programs are supervised and regulated and administered and operated at the local level (local departments of health or education). Day-care centers are operated by either municipalities or are industry or factory related ("enterprise" organized and operated). Regardless of operating auspices they are subject to the same public control and supervision. Although kindergartens are under the authority of the Department of Education, voluntary organizations, one in particular, also play a very active role (operating a little less than 20 percent of all kindergartens).

Sweden

Sweden is unique in this group of countries in that it has a single integrated child-care system termed "child care centers" for all children from the age of 6 months to compulsory school age (7). The only distinction made is between part-day or full-day care. Both group care in centers and home-based family day care are included in this system.

The overall central government authority for these preschool child centers is the National Board of Health and Welfare, under the guidance of the Minister of Health and Social Affairs and Minister for Family Matters. However, although the central government plays an important leadership role and assistance role, it is the local governmental authorities, the local child-welfare committees or social-services committees (and occasionally education or child-center committees) that are ultimately responsible for funding, initiating, establishing, and supervising these centers.

In addition, the Swedish system includes explicit arrangements for close collaboration and links with other systems important for child care and child development: the education system and education authorities at both local and central government levels; and the health system.

United Kingdom

The U.K. has a dual system of child care, divided on the basis of function, and clearly separating day-care and educational provision. Day care, including day nurseries and childminders (family day care) is for children aged 6 weeks to 5 years of age. Basic policy and standards of accommodation and care for day-care programs are set by the central government's Department of Health and Social Security, but the group programs themselves are established, administered, and operated by the local authority government (local personal social-service authorities). Nursery schools, the second child-care system, is for 3-5 year olds, and like day care, is essentially the responsibility of local government, in this case the local education authorities, but basic policy is set by the Department of Education and Science.

United States

The structure of child care in the U.S. does not lend itself to any classification into clearly delineated systems of care. Although a generalized distinction can be made between day care as a social service or social-welfare provision and nursery schools and kindergartens as education, some programs overlap the two functions, and there is no uniformity or coherence even among those falling under one or the other rubric. Nursery schools tend to be for children aged 3-5 or 6 and kindergartens for children aged 4 or 5-6; however, other forms of child care and preschool care cover wider age ranges. Where auspice and sponsorship is concerned, child-care programs may be public, voluntary (private, not-for-profit), or proprietary. Whereas nursery schools and kindergartens are more often public than private (2:1) most day-care arrangements in the U.S. are under proprietary (for profit) auspices. Of the nonprofit-care arrangements most are under voluntary-agency auspices. A very small number are industry or union sponsored. Funding for nonprofit-organized day care is from the federal government primarily; however, child-care activities generally are carried out through units of state or local government or by voluntary bodies, often with public funds which may involve a mix of federal, state, and local contributions. Although the federal government (the Department of Health, Education, and Welfare) sets general standards and some guidelines, states and local governments are responsible for establishing, administering, and supervising these arrangements. And at the state level administrative responsibility may rest in a single agency (such as the State Department of Education, or Health, or Public Welfare), several agencies (in addition to the above, Departments of Labor, Housing, Community Affairs), or as many, in one state, as eighteen separate agencies.

There have been some attempts at establishing a formal structure at the state level to coordinate these activities, but these efforts are still very limited in number. Major problems exist as a consequence of fragmentation in the child-care field and lack of coordination with other child-care-related services (e.g., health).

There are no systematic data available about programs for school-age children before and after school hours.

Yugoslavia

There are two systems of organized child care in Yugoslavia. One, day nurseries or crèches, is for children aged 0-4 and is under the jurisdiction of social welfare; the second, preschool or kindergarten, is for children aged 4-7 and is under the jurisdiction of education. (There is one exception to this precise distinction: In the province of Vojvodina, both day nurseries and preschool programs are considered to be part of the education system.)

Basic legislation and policy are set at the level of the individual republics, but for the most part policy, as well as administration and program operations, are implemented at the local level (commune).

IV

SOCIAL-WELFARE SUPPORTS FOR ALTERNATIVE ARRANGEMENTS

This topic is not covered consistently in the reports submitted by the individual countries; nor do any patterns emerge from the limited data available. Therefore, no effort will be made to present an overview. It may be worth noting that those countries with the most extensive number and range of social-welfare supports and social-insurance benefits related to child care, seem to be those countries with an explicit "family policy" (France, Germany, Poland, Sweden). The specifics follow:

Canada

Persons with 20 or more weeks of insured earnings (a "major labor force attachment") are eligible under the unemployment insurance act for benefit payments when the interruption in employment is caused by pregnancy. A maternity benefit is available 8 weeks before confinement, the week of confinement and 6 weeks after confinement to women who have had a major labor force attachment. They must also have been part of the labor force for at least 10 of the 20 weeks prior to the 30th week before the expected date of confinement.

France

France provides several benefits directed at facilitating child care by the mother in her own home. These include the following:

(a) a single-salary allowance for low-income families with dependent children and only one wage earner;

(b) an allowance for mothers staying at home, for low-income families where the only working member is self-employed, without a regular wage (e.g., farmers);

(c) a paid pregnancy leave for working mothers, covering 6 weeks before and 8 weeks after childbirth.

In addition, a day-care-expense allowance is provided for low-income families (where both parents work; or a one-parent family where the parent works) with a dependent child under the age of 3.

Homemakers* are also available for short-term crises or periods of need, where mothers are ill or there is a family emergency.

Federal Republic of Germany

Social-insurance benefits in the F. R. of Germany include a statutory health-insurance benefit that provides for lost income of an insured parent (a working parent) who must remain home because of the illness of a child. Coverage is for 5 days paid sick leave under this benefit, to be taken no more than once a year. Other benefits under this legislation include provision of household help or coverage of the cost of such help if a child is ill or handicapped. Eligibility is limited to families where parents (or one parent in a one-parent family) work, and the child is under 8 or handicapped.

Israel

The Israeli maternity-insurance scheme provides for all employed and self-employed women a 12-week maternity leave with pay of 75 percent of their regular wage or income. The leave can be taken starting 6 weeks before childbirth. In addition, employed women have the right to extend their maternity leave up to one year without pay. Also, some wage agreements provide for a small number of paid leave days to employed women caring for their sick children.

Poland

Special child-care social benefits in Poland include the following:

(a) the right to 2 single-day paid leaves annually to all women employees bringing up children under the age of 14;

(b) the right to up to 60 days of paid leave annually for a parent caring for an ill child under the age of 14;

(c) the right to 2 single-day paid leaves to provide personal care for a child under the age of 8, as the result of the sudden unavailability of usual care arrangements (closing of crèche or kindergarten, illness of parent or of other person usually caring for child);

(d) a fully paid maternity leave of 16 weeks for employed women, for a first childbirth; 18 weeks for subsequent births; and 26 weeks for multiple births (at least 2 weeks to be taken before the expected date of parturition).

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*Homemaker services are available in all countries covered, although the extent of provision varies substantially. Details will not be included in this report.

In addition, women have the right to extend maternity leaves (at the time of expiration) without pay for 3 years (if employed for at least 12 months prior to beginning paid maternity leave) and have the right to be reemployed in the same position as before.

Sweden

Social insurance in Sweden includes the following benefits related to child care:

(a) a paid parental leave for working parents for 7 months after the birth of a child, to be taken by either parent (or shared);

(b) a paid leave of up to 10 days per year for a father to remain home to care for a child (children) while the mother gives birth;

(c) a paid parental leave of up to 10 days to be taken by working parents (either one or shared between them) to remain home to care for an ill child under age 10;

(d) a special "nursing-care allowance" to parents with seriously handicapped children.

In addition, a small number of child-care centers have "child-minders" on staff who are sent to the child's home to provide care for an ill child when parents are working.

United Kingdom

In the U.K. there are maternity allowances for insured mothers which normally extend for 18 weeks, beginning 11 weeks before expected parturition.

United States

U.S. child-care benefits are of two types:

(a) a small child-care allowance provided for women in training programs or seeking jobs, while receiving public assistance;

(b) an income-tax deduction for single parents or couples with income up to $35,000 to deduct up to a fixed amount the cost of out-of-own-home child care (or an equal amount for in-own-home care). The provision has the effect of creating an in-own-home-care incentive where there are one or two children. The benefit is directed at middle-income families since low-income families pay little if any income tax (or at very low rates).

Yugoslavia

In Yugoslavia, the following relevant social-insurance benefits are provided:

(a) in most republics 180 days maternity leave is provided to be taken as follows: at least 28 (and at most 45 days) before expected childbirth. There is some variation among the republics in that in semiautonomous Vojvodina, 210 days are provided, while in Slovenia, up to 8 months from the time the child is born are provided. Moreover, in Slovenia, legislation provides for the father using this paid maternity leave if the mother dies.

(b) one other benefit is available if the mother specifically requests this: She is entitled to a 4-hour working day as long as the child is under the age of 3 "if the child needs more mother's care on account of a general state of his health" (to be confirmed medically).

V

SIZE AND COVERAGE ("TAKE UP")

Although this topic does not lend itself to easy summary because the specifics vary so from country to country, a few major patterns emerge (see Table 2):

(a) coverage for children aged 3 and over is not only much more extensive than for younger children, but almost every country other than the U.S. and Canada is currently moving towards universal and total preschool coverage for all children aged 3 and over, on a voluntary basis (or aged 4 and over where compulsory school begins at age 7);

(b) all countries consider that the quantity of programs for all ages is inadequate, but all define the "3s and over" (or "over 3s") as the priority age group where expansion of programs is concerned; only in those countries where preschool coverage is already very extensive is there substantial pressure for expanding coverage for the under 3s;

(c) the larger the number of mothers of preschool children in the labor force, the more extensive full-day coverage is;

(d) the predominant recognized indicator of "need" in almost all countries is the number of working mothers with children under compulsory school age;

(e) the major pressure for expanding care comes from parental need and desire (labor-force participation or other concerns such as interest in early education);

(f) all countries recognize the need for "before-and-after-school-hours" child-care programs (for school vacations as well) for children under age 14. Yet, with only two exceptions, coverage is sparse, sporadic, with very little systematic, consistently kept data available.

The specifics follow:

Canada

Canada has approximately 2.2 million children under compulsory school age. About one half of these are under age 3. One quarter of the total number, about 600,000, are children of working mothers.

About 26,800 children are in full-day care (including 1,500 in licensed family-day-care programs) and of these more than 75 percent are

TABLE 2

ORGANIZED - CHILD - CARE COVERAGE[(a)] FOR CHILDREN UNDER COMPULSORY SCHOOL AGE (C.S.A.)

Country (b)	No. of Children under C.S.A. (in millions)				No. of Children in Care				w/Working Mothers (Full Day)		Coverage Assessment			Need Assessment; Basis		
					Under 3		3 to C.S.A.				Percent of Cohort				No. of Places	
	Total	Under Age 3	Age 3-C.S.A.	Total w/Working Mothers	Full Day	Part Day	Full Day	Part Day	Under 3	3-C.S.A.	Under 3	3-C.S.A.	General Comments	Rationale	Full Day	Part Day
Canada	2.2 (under 6)	1.1	1.1	.6 (.24 under 3)	3,200	50,000	23,600	311,000	4,800	22,000	4%	28%	Less than 5% of the children of working mothers are in full day care; 57% are cared for in their own home; the rest are in informal arrangements	600,000 children under 6 have working mothers	200,000-600,000	No National Estimates
France	5.9 (under 6)	2.5	2.4	(.68 with children under 3)	359,000 Day Care 37,400 Kindergarten: 100,000 Family Day Care (licensed 222,000)		(Age 2 to C.S.A. 2.2 million)		About 340,000		15% (22% of 2-3 year olds)	85%		Gov't surveys; 25% of kindergartens have waiting lists	Double existing no. of day care and licensed family day care; kindergarten projected for full coverage for over 3s, 50% of 3s	
Germany	5.5 (under 6)	2.5	3. (under 6)	.8 (.23 under 2; .58 aged 2-6)	19,200	-	140,000	1,300,000	Less than 10% in organized child care At most 4%		Less than 1%	44%		Waiting lists for day care range from 2 months - 2 years	No National Supplemental before & after school program for most 3-6	Estimates By 1980, kindergarten for all 3-6 year olds
Israel 1975	.42 (under 5)	.26	.16	.06	23,600 aged 0-5	-	100,000		4,000 (est.)		12% (est.)	86%	65% of the children in day care have working mothers	Gov't policy - 100% coverage for 3s and over 30% for under 3	50,000 more day care places for 0-3; 15% increase for 3-5 year olds	29,000 places for 0-3
Poland	3.7	1.7	2	520,000 under age 3	147,500		700,000 200,000 in seasonal programs	70-80,000				50% (70% in urban areas)	30% of children of working mothers who are under 2 are in care; 90% of the children in full day care programs have working mothers	Complete coverage of children of working mothers	Kindergarten by 1980 100% coverage of 3-7s	

Table 2 (Cont.)

	No. of Children under C.S.A. (in millions)				No. of Children in Care						Coverage Assessment			Need Assessment: Basis		
Country (b)	Total	Under Age 3	Age 3-C.S.A.	Total w/Working Mothers	Under 3		3 to C.S.A.		W/Working Mothers (Full Day)		Percent of Cohort		General Comments	Rationale	No. of Places	
					Full Day	Part Day	Full Day	Part Day	Under 3	3-C.S.A.	Under 3	3-C.S.A.			Full Day	Part Day
Sweden (1972)	.8			.220	About 200,00 children in all or part day care				110,000 children almost all in full day care		25%		50% of children of working mothers	Complete coverage of all pre-school children	1975 - 100% of all 6 year olds, Then, 4-6 year olds with handicaps (physical, mental, emotional); all children of working or student parents aged 4 and over	
United Kingdom (England & Wales) (Figures include education only for Wales, no day care)	4.0 (under 5)	2.0	2.0		Under 5 108,000 More than half in family day care	340,000 (or play groups)	157,000	45,000			38% of children aged 2-5			630,000 working mothers, 1/3 of whom work full time; 6% of all children under 5 have 1 parent families	Preschool places for 15% of 3 & 4 year olds 35% of 3 year olds by 1982	35% of 3 year olds; 75% of 4 year olds by 1982
United States	20.	9.8	10.2	6.0	For under 6 year olds: 1 million in licensed care; (2 million in unlicensed care)		(kindergarten & nursery schools) 1.1 million	3.6 million	-		28% of total cohort in formal care. 45% of those aged 3-6, in pre-school		8% of total cohort in unlicensed care (est.)	6 million children of working mothers; 3.3 million disadvantaged and handicapped (all under 6)	9.3 (4.7 + 1.3) = 3.3	
Yugoslavia	2.6	1.5 (under 4)	1.1 (4-7)	-	No firm data but very few children in care		(4 to C.S.A. Ranges among Republics from 1.6%-35%		-	-	-	-	Coverage increased 50% between 1966-1970. No specific projections as to size of unmet need but acknowledged to be substantial. Long term goal is to cover all children of working parents or children otherwise needing care	-	-	-

(a) The terms "part day" and "full day", used in describing coverage, are defined as follows: (i) Full day is at least 6 hours per day or the normal school day for the country specified (ii) Part day is less than the above but at least 3 hours daily.

(b) The data included for each country reflect the most current figures available, unsually (but not always) 1973, where known and consistent for all categories in the table, the dates are specified.

age 3-5. Only 12 percent are under 3. Another 50,000 are in part-day programs. Some of these children are included in the 311,000 who attend preschool.

In assessing need, current national projections aim at universal full-day kindergarten for 800,000 children aged 4 and 5 (about three quarters of the age cohort) and 355,000 full-day day-care places for children aged 0-3. At an absolute minimum, assuming that two thirds of the children are cared for in their own home by preference (57 percent in their own home only; 11 percent in their own home with some additional supplementation), and therefore will continue to be cared for in this manner, there is still considered to be an immediate need for more than 200,000 all-day places for the 0-5 group. There are no plans for expanding part-day care.

With regard to before- and after-school programs for school-age children, although the need is recognized and acknowledged, little attention is being directed toward such provision. There are close to one million children in school under age 14 whose mothers work. There are very little systematic data available as to how many of these children are enrolled in any organized program, how many such programs exist, what they are like, or what is needed. It is preschool care that is stressed.

France

France has 5.9 million children under compulsory school age. Of these 2.5 million are under 3 years of age, 680,000 of whom have working mothers. Child-care coverage is extensive, in particular for 3 year olds and up. More than 85 percent of the 3-6 year olds, 2.1 million, are in the écoles maternelles, or preschool programs. More specifically, 100 percent of the 5 year olds, 93 percent of the 4 year olds, 72 percent of the 3 year olds, and 22 percent of the 2 year olds were in public education programs in 1972-73, and the figures are higher for the current year. About 15 percent of the under 3s (and even more important, more than half of the children under 3 whose mothers work) are in full-day day care, and one third of these are in family day care. Yet the goal is to provide day-care places for all children of working mothers and to provide kindergarten places for all children who wish a place. Thus, kindergartens are projected to expand further to achieve 97 percent coverage for 4 year olds, 80 percent coverage for 3 year olds, and 30 percent coverage for 2 year olds by 1977-78.*

Because kindergarten, or école maternelle, is not truly all-day coverage - but requires supplementary care for children of working mothers before school, at lunch, after school, and on short and long school holidays, there is pressure for expanded coverage for such times. Most schools have such coverage, involving only custodial personnel. About 20 percent of the schools offer special programs. There are additional, out-of-school programs also, but neither the extent of coverage nor extent of need is known precisely. About 384,000 children use the 2,300 outdoor and recreation centers before and after school and during school vacations. (The age cohort covered, between age 6 and 14, includes approximately 7 million children.)

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*Myriam David and Rène Lézine, Early Child Care in France (New York: Gordon and Breach, 1975).

Federal Republic of Germany

The F. R. of Germany has 5.5 million children under compulsory school age, 2.5 million of whom are less than 3 years old. Of these preschool age children, 800,000 have working mothers; however, some of these women work in their own home and many work only part-time. There is very little organized child care for children under age 3, and fewer than 20,000 children are in such care. The extended family still plays an important role; some 40 percent of the children of working mothers have grandparents living in the same household caring for them. In contrast, kindergarten or preschool education for 3-6 year olds is extensive and is expanding rapidly. At present 1.3 million children are in kindergarten, 44 percent of the age cohort, and it is projected that by 1980 kindergarten will be available to all wishing a place. The kindergarten program, like elementary school, is a half-day program and only about 140,000 children (primarily of working mothers) are in either one of the few full-day kindergarten programs or in some combination of kindergarten and other half-day organized care.

Adequacy of coverage and need for additional provision is assessed on two bases: For children under age 3, need is defined as the number of children of mothers working outside their own home, for whom there is no provision at present. There is beginning experimentation with family day care for such children. For 3-6 year olds, need is defined as total coverage for the entire cohort. It is this form which is the F. R. of Germany's priority at present.

Before- and after-school programs are considered to be of particular importance because the school program is basically half-day and excludes lunch. Yet of the 8.6 million children aged 6-15 (1.4 million of whom are children of working mothers), there are places for only 6 percent in special outside-of-school programs. Less than 10 percent of all the children in school (aged 6-15) are in full-day school programs and of these less than half are children of working mothers.

Israel

Israel has approximately 318,000 Jewish children under compulsory school age (5) as of 1973. About 197,100 are under age 3; and of these 35,000 are children of working mothers. Day-care coverage is limited (and program development recent). Only 23,600 children under age 5 are in day care (most under 3) and about 65 percent of these are children of working mothers. Current estimates are that at least 50,000 more day places are needed just for children under 3. Here too, however, the picture in preschool and kindergarten programs is very different. Of the 114,000 children 3-5 years old, 100,000 are in kindergarten. This includes 91 percent of the 4 year olds and 81 percent of the 3 year olds. Israel is aiming at universal coverage for children aged 3-5 within the next few years (a 15 percent increase in available places). As in other countries where preschool is so extensive, although not compulsory, the demand is very high. Although these preschool programs cover the full school day for primary grades, the school day is short (8 A.M. - 1 P.M.). Still, many have waiting lists.

After-school-hours programs cover about 4,500 preschool children in after-kindergarten day-care-center-oriented programs, and close to 500 children in other arrangements such as family day care. In addition, there is extensive youth movement and club activity financed by the Education Ministry for school-age children.

Poland

Poland has approximately 3.7 million children under compulsory school age. Of these 1.7 million are under age 3, and two million are aged 3-6. Of the children under 3 years old, 520,000 have working mothers, and of these 147,500 are in full-day day care (10 percent are in all-week - 6 days - care). Of the 3-6 year olds, 780,000 (about 50 percent of the cohort) are in kindergarten, and 90 percent of these are children of working mothers and are in full-day programs. Current plans stress preschool, kindergarten education primarily. Thus, 80 percent of the 6 year olds (the year before compulsory school) are now in kindergarten, and it is hoped that coverage will be complete for 5s and 6s, up to 70 percent coverage for 4 year olds, and 50 percent for 3 year olds by 1990.

Sweden

Sweden has about 800,000 preschool-age children of whom 220,000 have working mothers. At present, about 25 percent of the preschool cohort (with priority to children of working mothers, student parents, one-parent families) are in part- or full-day care. Current plans project 100 percent coverage (voluntary) of all 6 year olds by 1975 and 100 percent coverage of 4 and 5 year olds with special needs or handicaps (physical, mental, social) soon after. Center programs have extensive waiting lists, and coverage is expected to expand steadily until there is a place first, for all children of working or student parents, then for all children whose parents want such care for them, either in a full- or part-day program.

United Kingdom

There are about 4 million children under compulsory school age in England and Wales. They are divided equally between the under 2s and those 2-5. About 870,000 of the whole cohort are in some kind of organized child care. Of these 265,000 are in full-day day care or "full-time" education. About 439,000 children are in part-time programs which may range from 2½ hours per week to 5 afternoons a week. Only about 108,000 are in full-day day care programs, and of these more than one half are in registered family day care. There are 630,000 women who have children under age 5 and who work; one third of these women work full time. At present, the primary stress for expanding coverage is on the preschool program for 3 and 4 year olds. Current projections are that by 1983, 90 percent of the 4 year olds and 50 percent of the 3 year olds will be in preschool (either part- or full-day).

United States

There are about 21 million children in the U.S. under compulsory school age (6). Of these more than 6 million are the children of working mothers. Child care in the U.S. is not divided into either age-related or any other clear-cut classification, and figures for organized child care are not precise. Current estimates (1974) are that about 1.3 million children are in licensed full-day day-care centers, Head Start programs, or family day care. Approximately 1.7 million more are in some form of informal out-of-own-home care. About 4.7 million children aged 3 and over are in some form of preschool program (public kindergarten, private nursery school), and of these 76 percent are in part-day programs. About 79 percent of the 5 year olds, 38 percent of 4 year olds, and 20 percent of 3 year olds are in some preschool program.

There is no consensus about adequacy of coverage (quantity or quality of existing care) or size of unmet need for organized child care. The traditional analysis, limited to day care, is usually along these lines: If one assumes that 90 percent of the working mothers would want organized child care (equivalent to 5,400,000 children) and adds that to about 3.3 million handicapped and disadvantaged children, one concludes that there is need for almost 7.7 million places in the context of 1.3 million licensed day-care places at present. However, this analysis ignores the current preschool coverage of 4.7 million places (mostly part-day) - or at least does not consider that portion of the preschool coverage which meets the needs of working mothers. Nor does it relate to other goals. A rough but more valid estimate on these premises is 2.7 - 3.0 million.

There are no systematic data available for coverage of, or need for, before- and after-school programs.

Yugoslavia

There are approximately 2.6 million children aged 0-7 in Yugoslavia, and of these 1.5 million are under 4 and 1.1 million are aged 4-7. There are no data available regarding the numbers of children with mothers in the labor force.

Coverage in nurseries for children age 3 and younger is uniformly low or nonexistent in all the republics. Although coverage in preschool programs (for children over age 3) is substantially larger, there is great variation among the republics and autonomous regions; 1969 figures (the latest available for specific coverage by republic) reveal a range from 26 percent in Slovenia, 12 percent in Croatia, and 35 percent in Vojvodina (in general the more urbanized and industrialized areas) to 1.6 percent in Kosovo and 2.5 percent in Bosnia-Herzegovina (the most rural areas as well as those with the largest number of extended families).

The number of the hours in care varies by program and place.

Although no specific projections are given as to the size of the unmet need for child-care places, it is acknowledged that the need is great, that it cannot be met soon, that shortages will continue to exist for some time, and that given a need well beyond what can be provided, priorities will continue to be set along specified lines (see the following material). Thus the first objective is to meet these most urgent needs. Coverage increased by 50 percent between 1966-72, and the rate has accelerated since then.

VI

ELIGIBILITY AND FINANCING
(For Public and Voluntary Nonprofit Programs)

Programs tend to be universal (nonmeans tested). Low-income parents pay no fees for traditional "day-care" programs in most countries; however, most parents are charged fees for most programs. These fees are set on a sliding scale, related to income, number of children in care, length of day in care. Most countries charge no fees for preschool education programs but do charge for supplementary, after-school programs where they exist. In all cases where fees are charged, even the maximum fees are less than the economic costs of care.

Eligibility for most day-care programs is contingent on social or presumptive need. Where resources are in short supply, children of working mothers (especially low-income and single parents) and full-time students or children from inadequate and deprived families are given preference. In one country, Sweden, children with handicaps (mental, physical, emotional) are also designated for priority in assignment of scarce places.

Preschool programs, where available, set eligibility in terms of child's age, social maturity, and parental preference. Where places are limited, priorities are as specified in the preceding paragraph.

In general, data and breakdowns in the source of funding and construction and start-up costs are not precise enough for exact comparability. However, one overall pattern is overwhelmingly clear: staff salaries account for about 80 percent of the operating costs in day-care-center programs and close to that in preschool or kindergarten programs.

In the table which follows (Table 3) selective means available only on a means test basis (for the poor) while universal means available to those in the need status defined as eligible: The service may be free or paid for on an income-related sliding scale.

The cost and financing data are presented in the terms employed in each country, with no comparability attempted.

Canada

Canada's limited program of full-day care is designed primarily for low-income families, in particular those in which the mothers work. Within the group eligible for care one-parent families have priority.

Table 3

ELIGIBILITY CRITERIA AND METHODS OF PAYMENT

Country	Basis		Priorities: Presumptive Need				Other	Payment[a]		Comments
			Social Need							
	Univer-sal	Selec-tive	Working Mother	One Parent	Deprived[b]	Diagnostic Criteria		Day Care	Kindergarten	
Canada	Yes	None	Yes	Yes	Yes	For special needs centers	None	Income related fees: Average Fee $41-60/month full day, $20 part day	Free	Special need center fees: $.50-$5 per day
France	Yes	None	Require-ment for day care	Secondary priorities, but most children are from normal families		--	Age Day Care: under 3; Kinder-garten: 2-6	Income related fees: $.22-$5 per day	Free for basic program. For supplementary program; flat fees: $.35 per day and $1 per meal	Informal family day care averages $150 monthly
Germany	Yes	None	Priority No: (Discretionary) 1	3	1	4	Age & order of applica-tion	Income related fees vary among states.	Full day: averages $31 monthly, Half day $13.20	Proprie-tary full day care averages $44 monthly
Israel (Cri-teria vary for each system)	Labor & educa-tion	Welfare programs (day care)	Labor 75% Priorities for education: 3	4	Welfare 80% 1	2	Age, large family, order of applica-tion	Income related fees	$.68-$4.25 Flat fees: $15.30	Proprie-tary care average $17.00 monthly
Poland	Yes	None	Or full time students	--	Low income		If space, Health Dept. can refer child-ren it deems needy; Emplo-yees of industry related care	Income related fees: Average monthly 84 zlotys 3% of per capita family income	Basic program free. Maximum 700 zlotys monthly, 10% of per capita monthly income for all day supple-mental programs	Family day care fees arranged informally
Sweden	Yes	None	Or full time students 1	Priorities: 4	3	2	--	Income related fees and related to time in care $.22-$7.50 average $1.55		

Table 3 (Cont.)

	Basis		Priorities: Presumptive Need					Payment[a]		
			Social Need							
Country	Universal	Selective	Working Mother	One Parent	Deprived[b]	Diagnostic Criteria	Other	Day Care	Kindergarten	Comments
United Kingdom	Yes	None	Priorities: Day Care 1 Kindergarten 1	1 1	2 1	3	—	Income related fees	Free	Licensed family day care average $2.20 day. Private kindergartens aver. $400/yr. Playschools av. $.65/ session (AM or PM)
United States	Kindergarten	Day Care	Yes	Yes	Yes	Yes	Mothers receiving public assistance or work training	Income related fees: $1546-$1181 per year for those ineligible for subsidies in public programs	Free	Family day care av. $700-$1100 per year
Yugoslavia	Yes	None	Yes	Yes	Yes	For special programs	Children living in inadequate housing; Children from large families; Kindergarten may give priority to children who have been in day care programs	Income related fees: Maximum fee, yearly, to equal to about 1/6 of minimum wage		

(a) Proprietary programs excluded; where there are income related fees, the service is free to public assistance recipients and/or other poor.

(b) "Deprived" includes: economic, social, cultural, emotional deprivation

There are also a small number of programs for children with special needs (physical or emotional handicap) where both income and diagnostic criteria determine eligibility.

Standard average monthly fees are about $20 a month for half-day nursery-school programs and $41-$60 monthly for all-day programs. Most public facilities have sliding-fee schedules. For example, special-need centers charge sliding fees of between $.50 and $5.00 daily.

Day-care programs are financed by a combination of sources. Parental fees cover about 50 percent of the costs. Government subsidies from both federal and local governments account for a little less than one third. Most of this contribution comes through government purchase of services on behalf of families who could not afford to pay the full cost. About 10-15 percent is contributed through the sponsoring voluntary agency or through private philanthropy.

France

France's program of organized child care, including day-care centers, licensed family day care (both supervised and unsupervised), and kindergarten is a universal program. Eligibility criteria for day care include a requirement that children be healthy, under 3 years of age, and have working mothers. Individual programs may also be limited to children living in a particular geographic area, or, if industry related, to children of employees. There is some effort at reaching more socially deprived children, but most children attending these programs are described as being from normal families with working mothers. Parental fees are income related, with allowance made for one-parent families, more than one child in care, etc. Fees range from $.22 to $5.00 per day, but not even the maximum fee charged ever covers the actual costs of care. Informal (unlicensed) family-day-care fees average about $150 monthly (about $7.00 per day).

Average basic costs for establishing day-care centers (building and equipment, but not land) are about $4,000 per unit, and financing is borne by the central government (40 percent), the local government (20 percent), and the CNAF, a quasi-public social-security agency (40 percent). Operating expenses, of which 80 percent are for salaries, are covered as follows:

4 percent	central government
51 percent	local government
5 percent	CNAF (through such programs as: single-salary allowance, mothers-at-home allowance, day-care allowance, and social-assistance programs. See

	material on France page 17).
36 percent	Parental fees

Average per-child, per-day costs are: $7.50 in day-care centers, $6 for licensed family day care.

Eligibility criteria for kindergarten are that a child be between 2-6 and reside within the school's jurisdiction. There are no other requirements; however, where capacity is limited, priority is given to children of working mothers. The basic educational program, or the standard kindergarten program, is free. However, parents are charged fees, on a graduated basis, for the supplementary program (which would be essential for children of working mothers). This program covers before-and-after-school-hours care, meals, Wednesdays (a usual school holiday), and school vacations generally. Average fees (which vary depending on income but never cover economic costs), covering from 7:30 A.M. - 8:30 A.M., lunch, and from 4:30 P.M. - 7 P.M. during the school year, all day Wednesdays, and school vacations are: $.35 per day per child and $1.00 per meal.

Costs of the kindergarten facilities are borne by the local government with central-government subsidies. The unit cost for a facility ranges between $1,200 - $2,000. Operating costs are divided between the central government which pays the salaries of teaching staff and the local government which pays all other maintenance costs. A little less than half the costs of the supplementary-care program (49 percent) is covered by parental fees, the remainder by the local government. Average per-unit (child) costs are $250 per year for kindergarten and $400 per year for the supplementary program. For 1973, average monthly salaries were:

	men	women
skilled factory worker (Paris)	$385	$266
unskilled factory worker (Paris)	$229	$181

Federal Republic of Germany

Organized child care in the F. R. of Germany is available on a universal basis. Children under 3 are eligible for the very limited number of day-care places; children aged 3 and over, for the more extensive number of kindergarten places. Eligibility criteria are similar, apart from the age criterion. Priority is granted to the following: children of working mothers; neglected or deprived children (economically, socially, emotionally); children of one-parent, female-headed families; children in large families; and children whose mothers are ill. Apart from these theoretically preferential criteria, places tend to be obtained on a first come, first served basis. Fees for public or voluntary agency all-day care are relatively low, averaging about $31 per child per month and rarely going as high as $45 monthly (the average fee for proprietary care). The average fee for a half-day program is $13.20. Fees vary from state to state, but maximums are set by law; they are income related (and lowered for additional children in family in care) and never cover economic costs (in particular where day care is concerned).

How construction and operating costs are financed varies from state to state also. There is no consistent pattern but a reasonably typical one would be:

Building, equipment, and land for a kindergarten:
35 percent agencies; 40 percent community; 25 percent state

Operating costs (staff, supplies, etc.):
15 percent agencies; 35 percent communities; 25 percent state; 25 percent parents' fees

An average unit cost for construction (building, equipment, land) for a kindergarten is $2,640 per child. Average operating cost for a 66-place kindergarten (4 classes) would include:

$62,000	personnel
$8,650	material
$600	miscellaneous
$71,250	

In general, an average unit cost per child per month in kindergarten is $80; in full-day day care it is $265. (Kindergarten is half-day with no meals). At least 80 percent of all organized child-care operating expenses go into staff expenditure.

Average salaries are: $600 monthly.

Israel

Israel has a system of organized child care which has elements of both means-testing and universalism. Eligibility criteria and priorities vary from program to program.

Those day-care centers that are under the Ministry of Welfare are for children under 3 whose families are receiving public assistance and who are considered socially deprived (from large families, new immigrant families, living in inadequate housing, with problems.) By policy, 80 percent of the places in such centers are reserved for children characterized as deprived; however, it is reported that only 40 percent of the children are actually in this category. Day-care centers funded by the Ministry of Labor are primarily for children under 3 of working mothers, and 75 percent of the places in these centers are reserved for such children. The remainder include: some who are socially deprived and some who live in the area and want to attend. Fees vary from close to nothing (for public-assistance recipients) to $25.00 monthly. Fees are very low, income related, and heavily subsidized.

The kindergarten program is a universal program with extensive coverage for 3-5 year olds living within a school's jurisdictional area. Where there is a shortage of space, priority is given children from deprived backgrounds, large families, or who have working mothers. Demand for places is very heavy, and sometimes space is assigned on a first come, first served basis. Kindergartens are free for children of families on public assistance. Otherwise fees are income related for low-income families, ranging from $.68 per child per month to $4.25. For those with incomes beyond educational subsidy level (above $41 per person per month), fees may go as high as $15.30 monthly. Even at maximum, fees never cover operating costs, which average, for kindergarten, $19.50 per child per month ($29.00 for a day-care-center unit). Fees in proprietary kindergartens average $17.00 monthly.

For both day-care centers and kindergartens it is difficult to break down financing by source of funds. Central government, local government, and voluntary agencies all participate, but budgets are often interrelated and local government and voluntary agency budgets already reflect funds from the central government. For operating expenses of day care, the welfare services (local and national) pay two thirds of the operating costs for the children referred by them. These payments include parental fees when collected by the welfare service. The voluntary agencies pay one third of the remainder of the costs. The Labor Ministry pays a portion of the operating costs indirectly, subsidizing part of the fees for low-income working mothers.

The operating costs of kindergartens are covered all or in part by the central government's Ministry of Education, depending on location, need, etc.

Average salaries are: $276 monthly.

Poland

Poland has a universal program of organized child care that is specifically directed towards care for children of low-income working mothers. Full-day day care is exclusively for such children (including children of full-time students), who are between 6 weeks and 3 years of age (and for the same age children of employees of industries that provide day care). If space is available children with special needs (family deprivation or hardship) may be referred for these places by the Health Department. All-week care (Monday - Saturday) is for children of parents working alternate shifts or having to travel extensively for - or to and from - work.

Fees are income related (although fees for family day care are arranged informally, based on what the market will bear). Fees for public programs tend to be equal to about 3 percent of parental net income. The state provides 94 percent of the operating costs of day-care centers; parental fees and contributions from voluntary organizations account for 6 percent.

Although kindergarten coverage is far more extensive than day care, where there is scarcity, priority is given children of low-income working mothers or in other categories of social need. The minimum fee for full-day coverage (10 hours, 3 meals, and standard kindergarten program) is 60 zlotys monthly and the maximum is 700 zlotys monthly;* the latter is equal to about 10 percent of per capita monthly family income. The standard educational kindergarten program is free (5 hours daily) and part-day care with some meals is charged for accordingly. In Poland, also, fees never cover economic costs: the unit operating cost (per child) of a kindergarten for the all-day care described previously is 1,400 zlotys monthly. Of these costs, 75 percent are met by the state; 24 percent, by parental fees (see preceding material); and 1 percent, by voluntary agencies.

Sweden

Sweden's universal program of organized child care is distinguished only by whether it is center- or family-based, and all- or part-day. Preference for full-day care is given to working mothers and full-time students and to children with "special needs," physical, emotional, mental, or cultural handicaps. Fees, which never cover economic costs, are income related and also reflect the number of children from the same family in care and the days and hours a child is in care.

Fees range from $.22 per child per day to $7.50; the average fee is $1.55 per day.

Construction costs for centers range from $2,640 - $4,400 per place, and the central government contributes $2,400 of this. Operating costs average $2,800 annually per child. These costs are covered as follows: 35 percent central government, 50 percent local government, and 15 percent parental fees.

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*No effort has been made to convert figures in zlotys into dollars because the rate of exchange is artificially controlled and varies depending on whether it is a tourist rate, foreign official rate, or intra-country native rate.

United Kingdom

The British provide a limited amount of day care on a universal basis for children defined as eligible because of social need. More specifically, these are children who because of their own or their mothers' health, parental or home inadequacy, family deprivation, or the fact that their mothers work and are unable to care for them, require substitute care. Nursery education (kindergarten or preschool) is intended to be universal and free for 3-5 year olds, with current priorities for disadvantaged children (see preceding description). Operating costs for day nurseries average $30 weekly per place (or about $1,500 per year).

United States

In the U.S. kindergarten is a universal program but coverage varies among communities and states, and there are no data as to whether priorities exist and if so what they are. Public kindergarten is free. Voluntary and proprietary nursery schools average $1,800 per child per year.

Day care is means tested. Priority has been for children in certain problem group or family categories and for current, former, or potential public assistance recipients (although the new Title XX of the Social Security Act will permit coverage up to 115 percent of the state's median income with a sliding-fee scale). Estimated day-care fees for those ineligible for free or subsidized service are: $1,546 - $1,811 annually for full-day center care and $700 - $1,100 annually for family day care. Operating costs are estimated (1970) as $2,868 for infant care and $2,551 for 2-3 year olds (and $1,874 and $1,455 respectively for family day care), for 10-12 hours per day, 5 days per week, 52 weeks per year. Estimates for 1974 day-care costs are $3,200 per year per place in New York City. Eighty percent of operating costs go to staff salaries. The average public (state and federal) expenditures under AFDC (Aid to Families With Dependent Children) for child care in 1974 was $1,177. The median salary for women was $6,100. The average AFDC payment per recipient per year was $2,500.

Yugoslavia

Although eligibility criteria vary among the regions, the programs are all universal and priorities are based on presumptive need. Specific priorities include the following: children of working parents (particularly the children of blue-collar workers), children of one-parent families where the mother is working or of one-parent families generally, children of families living in inadequate housing, children from families where there are many children. Furthermore, kindergartens often give priority to children who have already been in the nursery program.

Fees are graduated, ranging from free to full cost, depending on income level. An analysis of fee payments was made for one region, Inner Serbia, covering the period from 1971-75. Of the participating parents 70 percent paid the full fee; 10 percent paid no fee; and the rest paid between 50 percent and 75 percent of the fee (a "full fee" is the equivalent of about 16 percent of a minimum wage.)

For program operations, the major source of financing (about 50 percent) is from the local communities for child welfare and/or education. Parental fees, the second major source, contribute about 20 percent of the operating costs. Special social-welfare funds provide another 20 percent. Allocations from the overall budget of the republic are minor.

VII

GOALS AND PURPOSES

Because of the relatively high degree of consensus around stated objectives, how they are revealed, program philosphy and orientation, and parent participation, these topics will be treated in more unitary fashion, with exceptions noted as they arise.

The following are the major objectives listed for day care and the order in which most countries list them:

(a) to care for children while mothers work;

(b) to care for and protect children when parents are unable to do so (parents absent, working, ill, inadequate);

(c) to compensate for various forms of economic, social, and cultural deprivation.

There is no country that does not list the first two objectives as among its priorities. Only two countries exclude the third listed objective (F. R. of Germany and Poland), and they include it among the objectives for preschool programs.

Among the other variations: Canada, Poland, Sweden, and the U.S. include "maximizing women's options" as an objective. Sweden stresses "enhancing child development and socialization," an objective which all countries except France and the F. R. of Germany list, although lower in the hierarchy than Sweden.

Only three countries make special note of programs meeting the needs of children with "special needs," children who are physically, mentally, or emotionally handicapped. The Canadian provinces incorporate this objective in designing and designating special programs for these children. The U.K. makes special provision for integrating a limited number of handicapped children into programs for normal children. Sweden, too, for whom caring for these children is listed as second in importance in its hierarchy of objectives - second only to enhancing child development - integrates these children into its standard child-care program.

Finally, only the U.S. includes among its list of objectives, caring for children in order to decrease the number of public assistance recipients. Moreover, the U.S. is the only country to list among its objectives all those found in other countries (except caring for children with handicaps).

The major objectives listed for kindergarten include those mentioned in the preceding material; however, higher in the hierarchy of objectives for all countries are: preparation for formal education, enhancement of cognitive and social development generally, as well as compensation for various forms of deprivation, and care for children while mothers work.

Explicit statements of these objectives for all countries may be found in either child-care legislation (social welfare, health, education) or official statements of government policy. These objectives are confirmed in the criteria defining eligibility for the programs and in the definitions of priority categories when provision is limited.

With regard to program philosphy and orientation all countries stress care for children under 3 as involving a basic element of "care and protection." Even for Sweden - where the developmental and educational aspects of child care from 0-7 are highlighted - general care and protection, the custodial function of day care, is still a presumptive basis. The differences among countries are revealed more in what is emphasized in addition to this basic component. Thus, as mentioned previously, Sweden stresses child development and education as an integrated program philosophy; Israel and Poland highlight the educational component along with basic care; and the U.S., while acknowledging all three, assumes programs may stress one or another orientation separately.

Again, where preschool or kindergarten programs for 3 year olds and older are concerned, an educational orientation is primary for all countries. Israel, Poland, and Yugoslavia are moving toward a social development component also. In the U.S. this dual orientation is characteristic of some programs but not of others. The U.K. has a long tradition of seeing education as development. Sweden with its integrated program of child care for children aged 0-7 is consistent in its program philosophy and orientation, stressing a balanced and integrated approach to social and cognitive development as essential to good child care.

In discussing the goals and purposes of organized child care in these countries, there is another perspective on care for very young children (usually those under 3, but in the U.K. up to age 5) that emerges in official statements about child care rather than in the listing of specific objectives. Referring to countries other than Sweden, which does not recognize two systems: the F. R. of Germany, Poland, and the U.K. stress day care for children as a residual or safety net program. It is care and protection for children when parents cannot provide the care themselves, while they work (if there is no other adult at home to provide care) or if they are ill or otherwise incompetent or inadequate. Maternal care - or close-relative care - or some form of in-own-home care is explicitly identified as superior, if available. Canada, France, and Israel reveal a more pragmatic perspective, defining the need for out-of-own-home care as recent and growing - and requiring a sustained and expanded societal response. For the U.S., all three perspectives exist and are reflected in different legislation and various statements of leading government officials.

In contrast, all countries other than the North American countries approach preschool or kindergarten programs from an institutional perspective, as an essential and integral part of child development and education - eventually, if not now, for all children over the age of 3. Sweden sees all of its preschool efforts as an essential complement even to the very best family care.

Parent participation in the sense of parents visiting programs, special events for parents and/or traditional parent-teacher organizations is quite general. There are also local parent committees, cooperatives, etc., in various places. However, parent participation in the sense of full parent control of publicly sponsored child-care programs, extensive parent involvement in policy making and program development, or considerable employment of relatively uneducated parents as paid staff (as in the instance of Head Start in the U.S.) is found only in the U.S. and Yugoslavia.

In both these countries parents participate in setting policy for the program and in the direct planning, administration, and management of programs as well as in the actual day-to-day operations. In the U.S., parents participate in activities with their children and are directly involved in programs as volunteer or paid-staff paraprofessionals to assure "models" from the child's own background.

VIII

MAJOR PROGRAM FORMS OR MODELS*

There are three major forms of organized child care: (1) day-care centers, (2) family day care, and (3) kindergartens. Two of these, day-care centers and kindergartens, are found in all of the countries reviewed.

Day-care centers are buildings or parts of buildings specifically designated for away-from-home, daytime care of groups of healthy children (usually at least 8 or 10 children, up to about 50-60) between the ages of about 6 months and compulsory school age. (Generally, they are subdivided into smaller age-related groups). The programs stress the care and protection of young children, may have some cognitive and social developmental aspects, and are operated under welfare or health ministries. They may be part-day or full-day but more often are the latter. They tend to be open 8-12 hours, 5 days a week, 52 weeks per year.

Kindergartens are preschool programs, under an education ministry or department, often part of the public elementary or primary school system, for children aged 3 to compulsory school age. Programs tend to be subdivided along age lines (e.g., 3s, 4s, 5s), stress cognitive development and preparation for formal schooling, and to a lesser extent, social development. The program may be half- or full-day and may or may not have a supplementary before-and-after-school-hours program attached to it, for the further care of children of working mothers.

In addition to the above, all countries other than the F. R. of Germany have extensive family-day-care arrangements whereby very small groups of children (fewer than 6) aged 6 months or one year to (usually) 4 or 5 are cared for in the home of someone other than the majority of the children. These arrangements may be made by the parents directly or mediated through a government or private agency. In some cases these are formalized and licensed programs; in others (the majority) the arrangements are informal.

All but Poland and Yugoslavia have some proprietary day care and nursery schools which provide programs similar to those in public programs.

The differences occur with regard to the number and type of system and auspice under which the programs operate, the extent of coverage, and the nature of eligibility. Much of this has been described already. Qualitative differences are much harder to assess and to compare. What follows will stress, instead, brief descriptions of these major programs in each country, with their individual variations. To ensure accuracy, most of these descriptions will incorporate the exact (or almost exact) wording employed in the reports from each country.

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*See also Section III, The Structure of Child-Care Programs.

Canada

Program forms in Canada fall into 3 basic categories, described as follows:

(a) day care center is a specifically designed place other than the child's own home, serving more than 5 children (under 14) for part or all of the day and for a continuous period not exceeding 24 hours (usually less than 12). It may be a building designed specially for day care or a multipurpose building such as a church or community center which has specifically designated - but not necessarily exclusive - day-care space. Three fourths of the day-care centers are privately operated (only 5 percent publicly sponsored).

(b) family day care is the supervised all-day care of not more than 5 children (under 14) in a private residence (other than the home of the majority of them) for a continuous period not exceeding 24 hours. All other home arrangements are referred to as "private neighborhood day-care arrangements." These are extensive, but there are no data on them.

(c) kindergarten and nursery schools are preschool, educational programs for 4 and 5 year olds. More than half are privately operated; the rest are public and part of the public school system in each province. The extent of provision is highly variable between provinces, and within the same province, from year to year. Most of these programs are part-day.

France

The following are the major forms of care provided by the French:

(a) day-care centers (crèches collectives) - all-day care, under the Ministry of Health and Social Security. The purpose of this institution is to receive during the day, while their mother is at work, healthy children under 3 years of age (i.e., no provision for sick children on the premises), 10-12 hours daily. Theoretically, centers are open 6 A.M. - 7 P.M., but in fact many are open as much 16 hours a day, 5 - 5½ days a week, 48-50 weeks per year. The users are predominantly middle-income working mothers (95 percent are "normal" families) and one third of the children are "only" children. The average number of places per day care center is 40-60, but the range is 20-100. Sixty is considered the optimum number.

(b) family day care (crèches familiales) - all-day care, under the Ministry of Health and Social Security. This service, provided in the home of a childminder or nurse, is for healthy children under 3 years of age, while their mother is at work. The childminder is certified and supervised by an expert in child care (1 supervisor to 40 children in several homes; no more than 3 children to a home including the mother's own preschool children).* The supervisor is paid by the agency sponsoring this type of service. Her job is to recruit the day-care providers, make weekly visits to their homes, stay in touch with parents and transmit their payments to day-care minders. The users are: middle class (49 percent); unskilled and semiskilled workers (34 percent); "problem" families (15 percent).

(c) childminders or nurses (guardiennes ou nourrices) - all-day care, under the Ministry of Health and Social Security. This category includes any person who wishes to take care, night and day, or for the day only, in her own home, of one or several children for periods longer than eight days. When the children are preschoolers, she must be certified by the health and welfare director of the "département." Users of this type of care tend to be lower class. (Many informal "clandestine," "unlicensed" arrangements are made in this category, also.) "Chance" day-care arrangements are generally felt to be unsatisfactory since they provide no guarantee either to the family or child (there is no medicosocial supervision). But even if there are some licensed providers who offer an excellent service, it is generally thought that these private arrangements should be progressively replaced by supervised family-day-care service which recruits day-care providers and ensures supervision along with regular work and employee status for the day-care provider. But it is obvious that because of the shortage of day nurseries and supervised family-day-care facilities (and notwithstanding the help from relatives, i.e., 33.5 percent of day-care arrangements), private and unsupervised day-care services are at the present time indispensable.

(d) baby-parking (haltes-garderies) - part-day care, under the Ministry of Health and Social Security. In this institution, during the day, for a limited time, and on an occasional basis, care is taken of children ranging from 3 months to 5 years, or 18 months to 5 years. A maximum of 20 children is permitted in such centers. The service is available to both working and nonworking mothers and provides some freedom for the nonworking mother who may otherwise be completely tied down to home and child care. These centers are usually related to either existing full-day day-care programs or nursery schools.

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*David and Lézine, op. cit.

(e) kindergartens (écoles maternelles) - a full-day program* (see following material) under the Ministry of Education. These are public schools, receiving (on a voluntary basis) children from 2-6 years old, before compulsory schooling starts. They are intended to provide a basic developmental education. Average class size is 39.2. However, in 1973 there were 5,000 classes that had more than 45 children registered per class. (Most of these were for 4-5 year olds.) This extensive program covers more than 85 percent of those children aged 3 and over and 22.5 percent of all 2 year olds. Users include a fairly equal proportion from all classes, with the majority from the middle and upper-middle class. In addition to its basic focus on cognitive, and to a lesser extent social development, it also serves a child-caring function in the case of children whose mothers work outside the home. However, if the mother works full time, the child must be attended to before school begins, during the lunch period, after school hours, and during school holidays. If such complementary services are not provided, the family then becomes responsible for finding these services. This supplementary care, for which there is a charge, covers 7:30 A.M. - 8:30 A.M., lunch, 4:30 P.M. - 7 P.M., and Wednesdays and school holidays and is available in about 20 percent of the écoles maternelles.

Federal Republic of Germany

The following are the major forms of organized child care in the F. R. of Germany, all under the guidance at the federal level of the Family and Youth Welfare Services (although real administrative responsibility is at the state level, under either the Ministry of Culture or the Ministry of Social Affairs):

(a) day nurseries are facilities designed to provide care for very young children, in order to meet the needs of parents (or an only parent) who for reasons of job activity or training are not in a position to take care of their infants or small children during the usual working time or business hours on workdays. These facilities include cribs (infant beds), play rooms, and equipment for infants and small children from 8 weeks to 3 years of age. Coverage is less than 1 percent of the age cohort, about 4 percent of children of working mothers (varies among the states). The average size is 32 places per facility divided into subgroups. For groups of mixed ages, there should be no more than 10 children, with a maximum of 3 under age 1. For groups of equal ages, there should be no more than 6 infants or 8 toddlers to a group.

(b) kindergartens serve to aid and support families by caring for children from age 3 - 6 either part-day (mornings) or all-day. Next to play, physical care, and general educational facilities for school children, the programs for preschool education are the most important and cover 44 percent of the age cohort. In some kindergartens there are so-called intermediary groups or preschool classes set up for 5 and 6 year olds planned as specific preparation for elementary school. The average kindergarten in 1970 had 67 places, a figure that had not changed in the preceding decade. The maximum number set by law is 120 places - with not more than 20 children for each class or group. In contrast to day-care nurseries, which are used more by working-class families, kindergartens are used predominantly by the middle class.

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*Some children attend only part day.

Israel

Israel has two major forms of child care:

(a) day-care center is an institution open generally 7 A.M. - 4 P.M. and sometimes longer. It is intended for the care of children between the ages of 1 to 5 years. The center provides three meals and also a social treatment and educational program during the time the children spend there. There are day-care centers for children of various age groups: the baby homes for children aged 1 to 3 or an all-day kindergarten for children from age 3. The center serves the needs of both parents and children. It serves as an instrument of the welfare services to assist parents and children or needy families by freeing the mother from caring for a child during the day. It permits the mother to go out and work and assures an educational program that helps enhance cognitive and social development. About 65 percent of the children have working mothers. Most centers are operated by voluntary women's organizations.

(b) kindergarten, for 3-5 year olds, is operated under the education ministry and is usually open 8 A.M. - 1 P.M. The overall purpose is to assist parents, particularly those coming from deprived groups of the population, in educating their children; and the specific program objective is to foster the physical, intellectual, and social development of young children. The educational program in these kindergartens is designed to enrich the mental development of the children, to help the personality development of the children, and to prevent the creation of social and educational deprivation among children of various population groups. Yet, although kindergarten enrollment is extensive and broad-based, attendance by lower-class children or children from deprived backgrounds (Asian and African immigrants) is significantly lower than among children of the more well-to-do (And this is an issue of current concern. See also Section XIII, following). The average public kindergarten class contains 30 children; 35 is the maximum set by the ministry. In addition to ordinary kindergartens the Ministry of Education is planning a network of "kindergarten clubs," another form of day-care center. They are intended for children aged 3, 4, and 5 only, in accordance with priority rules determined by the Ministry. The regular educational work of the kindergarten is conducted until 1 P.M., and from then until 4 P.M. another teacher takes charge with a day-care-center child-care program for the needy children who remain. The Ministry plans to develop in the next few years additional kindergarten clubs to absorb children from needy families. (The term needy is used to describe the criteria of social need mentioned earlier, used to identify priorities for admission to programs.)

Poland

Poland's child-care arrangements are divided into two systems: nurseries or crèches under the health department of the Ministry of Health and Social Welfare, for children under the age of 3; and kindergartens, under the Ministry of Education, for children aged 3-6. More specifically, the "nursery" is defined as a social-health-service institution for children between the ages of 6 weeks and 3 years, whose mothers work outside the home.

There are two basic kinds of nurseries operating in Poland: city-district nurseries and institutional nurseries (organized by industry, factories, and other similar organizations and attached to them). The majority of district crèches and those run by these organizations offer day-and-night arrangements operating on one-shift (8-10-12 or 16 hours) or two-shift bases (these are factory related). All-week programs covering 6 workdays (Monday-Saturday) are provided by approximately 10 percent of the total number of nurseries, with a number of representative nurseries of either kind differing from year to year. The capacity of the average crèche is 66 places (1973). (Standard types are either 60- or 75-place centers.)

Nurseries tend to be organized into 3 groups: one for babies aged 6 weeks-11 months; a second for children aged 1 year to 2 years; and a third for 2-3 year olds. Depending on size, each group is divided into smaller subgroups of 12-18 children.

Private nursery - micro-nursery (family day care). Private forms of child care have emerged in Poland to meet the great demand for child-care services beyond what exists formally. Private persons provide care and nutrition in their own homes, specially adapted for the purpose, to several children in addition to, or other than, their own. Fees are determined on the basis of a mutual agreement between the parents and the person(s) running the nursery.

There are also special "seasonal" nurseries organized in agricultural areas during periods of intensive farm work, usually at harvest time. They function as a combined nursery and kindergarten and are specifically designed to meet the needs of seasonal agricultural labor (and to ensure the availability of such labor, as and when needed).

The kindergarten is an educational institution for children aged 3 to the beginning of compulsory education. Its focus is on both cognitive and social development. Kindergartens tend to be divided by age, into four groups, aged 3-4, 4-5, 5-6, and over 6. Kindergarten education is carried out in

(a) kindergartens proper,

(b) infant schools (attached to elementary schools),

(c) kindergarten hearths, and

(d) seasonal kindergartens.

At present, about 90 percent of the children attending kindergartens come from families where the mother goes out to work. Descriptions of the basic kindergarten program include the following types:

(a) five-hour kindergartens, mainly for the children of housewives (unemployed women) or other children requiring no particular care outside the family environment;

(b) all-day nurseries, operating from 5 - 15 hours a day, chiefly for the children of mothers employed on dayshifts during the daytime, where the child remains for about 9 - 10 hours (i.e., covering the working time of the parents plus their journey from the kindergarten to the place of work and back);

(c) day-and-night kindergartens, for children requiring care either before 5:30 A.M. or after 8:30 P.M., because of the mothers doing shift-work;

(d) kindergartens with seasonal, changeable working hours, for children of mothers employed in farming;

(e) infant schools attached to elementary schools, organizationally dependent, though discharging functions analogous to those of the kindergartens proper;

(f) kindergarten hearths open up to 18 hours a week, either attached to elementary schools or to kindergartens proper, meant for children, who, though not attending a kindergarten, will enter elementary schooling in a year or two's time; and

(g) seasonal kindergartens, organized during the harvest period in villages deprived of year-round kindergartens and catering to children of mothers employed in farming.

Sweden

Sweden's child care is provided within one integrated system in which differentiation is made primarily on the basis of full- or part-day care. Child care is under the Ministry of Health and Welfare - supervised locally by the child-welfare social-review committee. Program models are described as follows:

(a) child centers is the blanket term for day nurseries (5 or more hours per day, or what is sometimes called all-day or full-day care), part-time groups (called play schools until recently, usually 3 hours per day), and free-time centers (before- and after-school care for school-age children.) If the free-time program is included with the day nursery or part-time group, the term joint child center is usually employed. Children served range from 6 months of age to age 7, the school-entering age. The hours that child centers are open for all-day care are 6:30 A.M. - 7 P.M.

(b) preschool is the uniform program term for either day nurseries or part-time groups (play schools). The categorical program differences between these have been ended. The only difference between them is whether the care is all-day or part-day. For infant groups the recommended age spread is 6 months to 2½ years; for "sibling groups" it is 2½-7.

(c) small day nurseries serve 6-12 children in a modest facility with trained staff but are unlike the regular day nurseries which have more elaborate facilities and programs, several groups, and more structured staff patterns.

(d) family day care is home-based but supervised and paid. It is a universally familiar program and still a major one in Sweden.

The Sweden program is unique among the countries covered in its assumption that responsibility for children who are temporarily ill, should be carried by the preschool if possible. Thus, in addition to paid sick benefits for the working parent of an ill child (up to 10 days annually for fathers and for mothers jointly) some child-care centers have "childminders" attached to the center, who go to the home of a child in case of short-term illness, when mothers work.

United Kingdom

The major program forms are: childminders (family day care), local-authority day nurseries (day-care centers), play groups, and maintained nursery schools and classes (kindergarten).

(a) childminders are usually ordinary housewives wanting to earn some extra money by looking after other people's children. Many have children of their own and will look after one or two other children, usually because the parent is working. The range of quality is enormous, but where it is good, childminding is seen as an excellent substitute for the mother's care. Where it is bad, however, it consists of minimal attention given to the child, often in conditions hazardous to health, and provides no emotional or intellectual stimulation.

(b) *day nurseries*. Local-authority day nurseries provide a day-care service for priority children (see earlier description) aged 6 weeks to 5 years. They are normally open 10-11 hours, 5 days a week, 50-52 weeks a year. Standards of accommodation and care are laid down by the Department of Health and Social Security (and operated by the local-authority, personal-social-services department). Provision is usually for about 50 children. The main part of the child's day is spent as a member of a small mixed age group of 6-9 children which has a nursery nurse attached to it with whom meals (breakfast, lunch, and tea) are taken. Some nurseries separate infants from the rest of the children, but this practice is declining. For the 3-5 year olds some part of the day is normally spent in outdoor play or walks, and about 2½ hours should be spent specifically with children their own age using the usual kind of play materials. Because of definition of priority, day nurseries are for children with special needs; they may sometimes have a high proportion of children with problems of behavior or adjustment. Some physically or mentally handicapped children are often incorporated into these programs also. The basic function of a day nursery is the care and protection of the young child. Traditionally, stress has been placed on the child's physical well being, but with the transfer of day nurseries from health to social services in 1971, emotional care and social development are receiving greater attention. Some educational component is included, but less than most authorities seem to think is necessary.

(c) *play groups*. A play group is a group of 6-40 children aged 2½-5 who play together regularly, daily, or a few times a week. Children attend, generally, one or two mornings a week for 2½ hours. The program usually includes 1 hour of free play; ½ hour snack; ½ hour supervised group session (singing, story telling); and ½ hour supervised craft or handwork. These groups make an explicit effort at parent participation, although evidence seems to indicate it is limited. Most users are middle class.

(d) *maintained nursery schools and classes*. Nursery education takes place in both separate establishments headed by a nursery teacher and in classes attached to primary schools where the head (or director) is head of the primary school. It is the nursery-class program which is currently projected for expansion. The children are aged between 3 and 5 (when compulsory education begins) and usually attend either mornings *or* afternoons rather than all day. Stress is on cognitive and social development ("learning through play"). Education in the sense of specific skills and content is *not* seen as an objective.

United States

There are four basic models for out-of-own-home child-care provision in the U.S.: family day care; group or center care; kindergarten or nursery school; and after-school community-center or recreation programs. However, there is very wide variation within each model and some programs attempt to combine elements of both.

The first basic model is *family day care*. Under this model, one or more children are cared for in the home of other families. Care may be provided for a part-day or a full-day, and the provider is paid on a fee-per-child basis. Such care is frequently private and informal: the parent and provider make their own arrangements regarding fees, hours, and meals. Family day care is also provided through voluntary and public social agencies which are expected to evaluate the homes prior to use, conduct training programs, set regulations, make periodic inspections, provide ongoing consultation and support service, and handle the arrangements between parents and providers. Formally licensed and regulated family day care (perhaps 10 percent of all family day care) is usually limited to 6 children between ages 3 and 14, no more than 5 under age 5, no more than 2 under age 2, including the provider family's own children.

There are two basic variations of this model. One is the family-day-care home which services only as many children as can be integrated into the provider family's own physical setting and pattern of living. The other type of day-care home is a special group day-care home which provides for 6-12 children in a family-like setting. Such a program is usually under agency auspices, requires more than one caretaker, and is considered most suitable for part-day care of school-age children.

The second basic model of child care is the *day care center*, serving groups of 12 or more children. Center care is most frequently provided to children aged 3 to 5, but some day-care centers also serve infants and school-age children. This model is used primarily for children of working mothers but is also employed occasionally for children from families with special need as, for example, those in which the mother is disabled or unable to provide adequate care. Day-care centers are conducted under independent, voluntary, or public auspices. Although there is usually a fee for service, some centers are operated as parent cooperatives or partial cooperatives in which the fee is larger if labor is not contributed. The objectives of various day-care centers range from the basically custodial to the educational and elaborately developmental. Thus there is great variation in regard to the types of program provided, the numbers of children served in each center, staff-child ratios, and physical facilities. Children are generally cared for on a full-day basis (5 or more hours) in subgroups organized according to age.

Centers set their hours in accordance with the work and travel patterns of parents, and they are often open 8-12 hours a day. Variations on the traditional all-day, daytime, 5-day-a-week center are the occasional night and overnight group day-care centers and 6-day facilities. Centers usually provide year-round coverage on their own, or in collaboration with other centers, to meet the needs of working families.* (There are also group day-care facilities staffed to undertake remedial and therapeutic work with special groups of children and to cope with handicaps and disabilities. There are also some drop-in centers without set registration, mostly nonprofit, which take a child occasionally - if the mother has errands or appointments. However, these two forms are very minor and small-scale, and exist in all other countries also. For example, coverage is far more extensive for such arrangements in France and Sweden.)

There are several other types of programs, employing some variation of this basic center-care model. Operation Head Start was organized as a summer program in 1965 as an antipoverty program for preschool children from low-income families. Although it soon expanded to a full-year program, it provides only half-day care for about two thirds of its registration, thus not attempting to meet the needs of most working mothers. Its goal is child development, "social competence" - with an emphasis on socio-emotional growth, cognitive development, health, and nutrition service - and not on care of children so as to permit other activities (work or training) by mothers. Although all Head Start programs are expected to provide education, health, nutrition, and social-work services to children and their families, to provide employment for community residents, and to encourage a high degree of parental and community participation, programs are under local leadership and inevitably vary a great deal. Some offer little more than basic group custody. Others are inventive and outstanding. Efforts at cognitive stimulation, a major component of the Head Start rationale, are not uniformly present.

Another prevalent form of center-based care is the nursery school or play school or preschool. Like day-care centers, nursery schools are conducted under a variety of auspices. However, they usually provide only half-day care and - when private, proprietary - serve children from middle- and higher-income families. The major objective of all nursery-school programs is presumed to be socialization and education, and all activities are expected to contribute toward this end. However, nursery schools are also frequently used by families as a means of providing a respite from child care for the mother.

Although many formal public and private social agencies provide one or more of these basic models of care, the facilities are frequently also administered as separate entities and there is little attempt to merge or coordinate them in a total child-care system.

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*By contrast, nursery schools, kindergartens, prekindergartens (see following material) are limited to half-days, usually 3-4 hours, 5 days a week, during the school year. Most Head Start centers (two thirds) are half-day but may be year-round except for a vacation month. There are also numerous public and voluntary (nonprofit and proprietary) all-day summer day camps.

Preprimary enrollment (other than Head Start) consists of nursery schools, kindergarten, and the prekindergartens in some school systems. Their enrollment is heavily weighted with 5 year olds (78.6 percent of the cohort) and declines rapidly to 37.6 percent of the 4 year olds and 19.8 percent of the 3 year olds. Except for Head Start, "take up" is biased toward the nonpoverty income groups and favors children of better-educated parents.

After-school centers. This is hardly a true model. It is best seen as a "function" discharged in one of many ways: clubs or organizations, buildings with recreational and sports facilities, and school buildings open after hours. In general, after-school programs for children 6-14 years of age do not necessarily differentiate those whose mothers work from other participants. Coverage is poor.

Yugoslavia

Yugoslavia has all the major program models found in the countries described earlier:

(a) children's nurseries or crèches: social, health, and educational institutions for the daytime care of children up to the age of 4. These institutions may be either in independent facilities set up for the explicit purpose of caring for children or provided at the mother's place of work as part of an industrial enterprise.

(b) kindergartens or preschool programs: institutions in which systematic education, upbringing, care, and nutrition of children aged 4-7 is provided until their entry into primary or elementary school.

(c) combined institutions: facilities consisting of both children's nurseries and kindergarten (jointly located, but not integrated, into one program) in one place within the local community or neighborhood. They thus provide at one location programs for children of all ages before entering primary school.

(d) family day care: the organized daytime care of children in a family other than their own. The vast majority of such care is informally arranged, unregulated, and uncounted. Only 1 republic, Croatia, passed legislation in 1974 noting the need to regulate this practice.

In general, programs vary in the length of time they are open and in the extent of care provided. Some offer part-day care (5 hours); most offer full-day care equal to 10-12 hours daily, Monday to Friday, year-round; some others offer 24-hour or all-week (Monday to Friday) care.

IX

GEOGRAPHICAL DISTRIBUTION OF FACILITIES

All countries reflect some geographical inequities and maldistribution with regard to the availability of organized child-care programs, in particular an imbalance between urban and rural areas. However, it is worth noting that those countries in which the variations are greatest are those where major initiatives depend upon local government. Thus, Canada, the F. R. of Germany, the U.K., the U.S., and Yugoslavia reveal an enormous range in program coverage.

Little if any data exist with regard to informal arrangements.

Canada

Coverage - for both day-care and kindergarten facilities - varies substantially from province to province, within provinces, and where kindergarten programs are concerned may even vary within a province over time. In general, coverage is more extensive in the wealthier provinces, in urban areas, and in university areas.

France

Day-care centers (crèches) are usually established in residential neighborhoods. Nurseries at place of work, which were developed at a time when great stress was laid on mothers breast-feeding their children at their places of work, are currently not advised because of transportation difficulties, time required, and child fatigue.

Both day-care centers and kindergartens are more readily available in urban and suburban areas; they are often nonexistent in rural areas. Thus, for example, Paris has about 50 percent of all the crèches (or day-care centers) in the country, although its population represents only about 20 percent of the total.

Federal Republic of Germany

Although day-care centers average 7 places per 1,000 children in the F. R. of Germany generally, West Berlin averages 120 places per 1,000. No other city comes anywhere near this number, the next highest being 10 places for Baden-Wuerttemburg and 9 for Hamburg. Moreover, where there are programs, public nurseries are far more extensive in heavily urban states while voluntary-agency programs predominate (except for Bremen) in others. By law, day-care centers are to be built in residential areas only, near shopping centers, public transportation, and primary schools.

Kindergartens tend to be located in working-class and middle-class areas; they are found less often in upper-class areas and are almost nonexistent in rural and agricultural areas. Like day-care centers, kindergartens are supposed to be placed near public tranportation but away from heavily trafficked areas or excessively dirty or noisy areas.

Israel

In Israel, public policy assures fairly equitable geographic distribution of child-care programs. Of the total number of day-care centers 36 percent are located in the large cities, and close to 43 percent of all children are placed in them. About 35 percent of the centers are located in other urban areas, and almost 34 percent of the children are enrolled in those centers. Development towns have 21 percent of the centers and about 19 percent of the children. Only scattered day centers with a tiny number of children are to be found in nonurban settlements.

Where kindergartens are concerned, there is special effort made (particularly heavy subsidies) to establish programs in immigrant communities and other newly developed areas, where programs are considered by the government to be essential and the localities would not otherwise be able to finance them.

Poland

In general, day-care centers and kindergartens are far more prevalent in urban areas than rural areas. Thus, 70 percent of the children in urban areas are in the kindergarten (of the cohort aged 3-7), while the figure drops to 50 percent once all geographical areas are averaged in. Even those programs that exist in rural areas are of "lower quality" (e.g., seasonal rather than year-round; or "kindergarten hearths," part-day programs focused only on specific preparation for elementary school).

Where day-care centers are concerned, they are supposed to be established in residential areas or attached to factories and industrial areas. Because of the scarcity of child-care programs generally, the major stress in the country is to assure kindergarten education for all children for the year prior to compulsory school entrance. Thus, "kindergarten hearths" are established where support for full kindergarten programs is not adequate.

Sweden

Child-care centers are still not distributed uniformly throughout Sweden. As in most countries provision is far more extensive in urban areas than rural areas. Some effort is being made to offset these problems by requiring that all new communities - and all new residential areas with more than 200 dwelling units - must set aside space for child-care centers and establish them concurrently with new residences. In general, centers are set up in residential areas, not in connection with working places, both because of parental preference and because early morning and evening travel for young children is not considered good for them.

United Kingdom

More than one third of the total day nurseries are in four areas: inner London, the county of Lancashire, and the boroughs of Manchester and Birmingham. Childminders are most numerous in the London area also. In general, there is no known rationale regarding the extent and distribution of day-nursery provision and no visible relationship between childminding and day-nursery facilities, which in principle are substitutes for one another.

Illegal (unlicensed) minding is presumed to flourish where local-authority nursery places are scarce, female employment rates are high, and there is a substantial immigrant population. To this extent it is primarily an inner-city phenomenon.

With regard to nursery education (kindergartens) again there is wide variation without any known reason.

Play groups, for the most part the program utilized by the middle classes to compensate for the lack of nursery-school education, tend to be found in the more middle-class areas. Thus, the outer London (suburban) boroughs contain one third of the play group places.

United States

It is generally agreed that day-care facilities are not distributed evenly throughout the country. There was and is great variation among the states. As might be expected, the largest states have the greatest resources; California, for example, which has a state-supported day-care-center program has the largest number of both day-care centers and family-day-care homes. New York, which is second, weights family-day-care homes relative to day-care centers more heavily than California. Texas and Massachusetts, which both have a large number of day-care centers, have relatively small numbers of family-day-care homes and these are all under independent auspices. Also, although the smaller states tend to have fewer facilities, a few have relatively large numbers of programs, and some of the larger states have surprisingly few facilities.

There do not seem to be any strong regional patterns, although the Western states tend to have the largest number of day-care facilities under public auspices, whereas the Southern states appear to have the fewest publicly supported programs. Generally, large urban areas have a higher proportion of organized facilities than rural areas.

These figures, of course, only take account of licensed or approved day-care facilities. There is no way to estimate accurately the number of unlicensed facilities, much less their distribution. This is especially true in regard to family-day-care homes, less than 10 percent of which - as noted - are licensed. There are estimates that 1-2 million children are cared for in this way.

Preprimary enrollment figures for 1974 show that approximately 4.7 million children or 45.2 percent of all children aged 3-5 were attending some sort of preschool education program. The Table below describes the regional variability in the proportion of eligible population served in preschool education programs in October, 1973. It is not known whether after-school programs are similarly distributed.

Regional Variability in Proportion of Eligible Population Served by Preprimary Programs, 1973
By Age

(Percent of cohort served in each region)

	Northeast	Northcentral	South	West
3 year olds	13.9	10.9	15.5	18.4
4 year olds	35.4	30.2	35.4	36.4
5 year olds	74.0	84.5	68.0	81.1
Total 3-5 year olds	41.0	41.0	39.6	43.1

Yugoslavia

There is great variation among the republics and regions regarding the numbers of child-care facilities. Rural areas are largely unserviced, while urban areas have more coverage. Of the existing nurseries and preschool programs, 22.5 percent and 14.3 percent, respectively, are established as part of some other institution or facility. Most of these are work-related institutions or enterprises. The rest, including all combined institutions, are located in residential neighborhoods and the regulations often stipulate the maximum distance between residence and facility (e.g., a 15-minute walk).

X

STAFFING: CATEGORIES, QUALIFICATIONS, NUMBERS

It would take specific study beyond our scope to assemble comparable staff data that would rise above confusion and inconsistency of definitions and concepts. It is more valid, for present purposes, to describe what the research staffs report, and not to compare the countries, except for the brief comment below.

In general, care for children under age 3 is described as requiring particularly high staff-child ratios (1:5, or at most 1:8, although in Israel it is as high as 1:15, but this includes 3-5 year olds also). For 3-6 year olds the range is enormous, from 1:10 to 1:40 in the French écoles maternelles.

Without more precise data it is impossible to generalize about staff training and qualifications except to note that kindergarten programs stress teacher training and qualification, day care/crèche programs stress nursing and/or child development, and few qualifications are required and/or little training is available for family-day-care mothers in any country (with some exception in France).

Canada

No national governmental standards have been set. The Canadian Council on Social Development guidelines recommend staffing ratios as follows:

Family day care:

- Not more than 5 children per primary staff person (directly responsible for child care), not more than 2 of these children being infants, and including the family-day-care-provider's own preschool children.

Day-care centers:

- For infants, a ratio of 1 primary staff person to every 4 children.

- For toddlers, a ratio of 1 primary staff person to every 5 children.

- For children aged 2½-4, a ratio of 1 primary staff person to every 9 children.

- For 5 year olds, a ratio of 1 primary staff person to every 12 children.

The Committee suggests that groups of infants should never be larger than 12, and groups of toddlers never larger than 15. For children aged $2\frac{1}{2}$-4 years and for 5 year olds, the groups should not be larger than 18 and 24, respectively.

In commenting on these recommended ratios, the report states "the Committee is not aware of any conclusive evidence to the effect that any one specific ratio of adults to children in a day care service is significantly better than any other ratio...."

France

Staffing ratios in day-care centers for children under age 3 are set by government policy as follows:

1 person per 5 children who do not yet walk

1 person per 8 older children

Beyond this minimum, staff ratios vary widely among programs.

No formal training is required of staff; however, most are child-care-worker aides who are graduates of an accredited school under the Ministry of Health and Social Security. Thirty-two percent of the programs have a nursery-school teacher on staff. A few have psychologists also. There are no males on staff. Doctors visit once or twice weekly on a preventive or as needed basis.

Supervised family day care is directed by a trained child-care worker who may be responsible for 40 children in as many as 7 or 8 different homes. This social worker recruits the licensed day-care mothers who must have annual medical checkups.

Part-time day-care centers are also strictly regulated with regard to staff.

The service must be operated by a woman between the ages of 21 and 65 who is a graduate (child-care worker, midwife, social worker or nurse) from an accredited school and has at least one year's experience in an institution or program for children.

If the part-time day-care service receives children over 18 months of age, it may be operated by a nursery-school teacher.

The director has the assistance of 1 trained staff person per 20 children.

Staff is under the same medical control as that of day nurseries.

For preschool programs (écoles maternelles, nursery schools), in which children aged 2-6 may be enrolled, the child-teacher ratio is approximately 40:1. Teachers are graduates of special teacher-training programs.

Federal Republic of Germany

Staffing for day-care centers include: 1 kindergarten teacher and 1 nurse for each mixed aged group (up to 10 children); 1 nurse and 1 assistant nurse for infant groups (up to 6 children); 1 nurse, 1 assistant nurse, and 1 kindergarten teacher for toddler groups (up to 8 children); and 1 social worker for up to 4 groups (of any category).

For kindergarten, staffing ratios are as follows: for each group or class (maximum 20 children), 1 social worker for up to 4 groups and 1 teacher and 1 nurse for every group.

In general, for a "3 group" or larger facility, there must be an especially qualified youth leader (social pedagogue) to function as administrative director, responsible for the operations of the kindergarten.

The usual standard staffing pattern in kindergartens is: 1 principal or director for the overall program and 1 fully trained teacher and 2 assistants for each group of children. The necessary personnel are determined by the average size (number of places per facility in the state) and from the state laws. Thus for example, for a kindergarten with 80 places (national average is 66.4) there would be: 1 principal, 2 teachers, 2 assistant teachers, 1 nurse, 1 assistant nurse, and cleaning and miscellaneous help (120 hours per month).

Israel

Staff ratios in day-care centers generally are approximately 1 child-care worker (professional or nonprofessional) to 15 children. On the average, 30 percent of the personnel working in these centers are maintenance staff (cooks, cleaning women), 20 percent are professionally trained child-care staff, and 50 percent are nonprofessional child-care workers. In general, the highest proportion of professionals are in large cities (32 percent), decreasing to 18 percent in development towns, and 1 percent in nonurban settlements. As a consequence, the communities where professional staff are considered most needed do not have such staff.

In a kindergarten, for each class of 35 children staff includes a qualified kindergarten teacher who must be a graduate of a special training program and an assistant who may be a nonprofessional. Salaries for the nonprofessional assistants are low, and therefore competent staff are difficult to obtain.

Poland

In the nurseries (day-care centers, crèches) staff ratios include one technically or professionally qualified staff person for every 22 children and a part-time physician. For kindergartens, the ratio is 1:16, or 17.

Sweden

Of necessity, staffing ratios are high to implement the high standard of Swedish child care, and staff training is essential. At present, staffs meet the numerical-size requirements but are often insufficiently trained by Swedish criteria. Turnover is high. The National Board of Health and Welfare recommends:

- At least 2 qualified preschool teachers per preschool all-day unit and an overall ratio of 1 staff person for 5 children in the 2½-7 age group (not including staff for food service) and 1 staff person for 4 children in the under 2½ groups.

- At least 1 qualified teacher per 40 children in the part-day programs (two groups of 20, each for 3 hours) for 5 and 6 year olds, and 1 teacher per 30 children (two groups of 15) for 4 and 5 year olds.

Although staff-child ratios have been maintained, only half of those employed as teachers have received the special preschool training they are presumed to need. Many such positions are held by trained children's nurses instead, because there is such a shortage of teachers.

United Kingdom

In general, although staffing standards (numbers and qualifications) are formally established they tend to be standards to aim at rather than ones that are consistently achieved.

A ratio of 1 child-care staff member to 5 children is regarded as a "reasonable standard" in day nurseries, assuming additional staff for maintenance duties; a higher ratio is thought desirable if there is a high proportion of very young children. Staff qualifications include a requirement for special training, or at least that such training be in process. Such a course, for girls aged 16-18 or older, prepares them for working with children in residential institutions or hospitals or to be a "nanny" with a private family. A recent survey of 6 nursery nurse-training schools revealed that almost half of the graduates took jobs in nursery *education* while only one quarter went into day nurseries or residential *institutions*. At present, a new, higher level course is proposed as preparation for more responsible positions in day and residential care and a lower-level course for more routine, direct child care. Staff turnover is very high, especially in London, and staff tend to be young and inexperienced.

The staff in nursery schools and classes include qualified teachers, nursery nurses with a special qualification, and unqualified assistants. Teachers may have special infant-nursery training or may have trained to teach older children. In a recent (1973) survey which covered 96 schools the ratio of nursery school teachers to nursery places was 1:30.7 and of nursery nurses to places 1:16.9, giving an overall staff-child ratio of 1:10.9. In addition there were a substantial number of students in training. Over the country as a whole, the ratio is about 1:13, with 2 nursery nurses (nursery assistants) to 1 teacher. It is the Government policy to maintain this overall staff-child ratio but to increase the proportion of trained teachers to 50 percent of all staff and to support them by trained nursery assistants. At the moment, a number of nursery assistants remain unqualified. This shortage of trained staff is not expected to end soon. Among the reasons for the shortage may be: the low salaries paid such staff; the low status attached to this work; and the absence of career structure.

United States

Nursery schools and kindergartens are generally administered within educational systems and staffed and led by personnel with credentials recognized in the field of education. Day-care centers, to the extent that they are not very small and are in jurisdictions which mandate standards, often assign their program leadership to personnel with educational credentials as well. For these several purposes the credential may be an elementary-school teaching certificate, a kindergarten certificate, or special qualification in what is known as the field of "early childhood education." No easy generalizations are made about Head Start, family day care, or after-school programs for school-age children. Moreover, each of the program models described may draw upon social workers, nurses, nutritionists, recreation personnel, "mature, experienced adults" with no particular specialized training, and college graduates or indigenous personnel, whether or not specially trained as paraprofessionals.

Requirements with regard to staffing ratios and qualifications vary from state to state, depending on state standards and specifications. Certain voluntary child-welfare agencies, in particular the Child Welfare League of America, suggest the following guidelines:

- Staff-child ratios should be related to age and kept as low as necessary to ensure individualized attention. For example, for day-care centers, it is suggested that the ratio for children aged 3-4 should be 1:5; for children aged 4-6, it should be 1:7; and for children aged 6-14, it should be 1:10. The ratio for all children in family-day-care homes is expected to be no higher than 1:5.

The reality is there are many child-care staffing patterns. This is inevitable in a field with many types of programs, financed out of several legislative mandates, either unregulated or under the jurisdictions of diverse governmental units - local, state, federal - and "claimed" by several professions, semiprofessions, and occupational groups. The differences in concepts and programs among kindergartens and nursery schools, day-care centers, Head Start centers, and the several types of after-school programs create different staffing requirements. The debate about goals (child care to meet parent needs or optimum child development; quality service or maximum quantitative expansion, etc.) fosters honest differences about optimum staffing.

Although totals and averages for staff in child-care programs are reported from time to time, no recent estimates are available.

No state has special training requirements for personnel in either "in-home" or family-day-care homes, and approximately one third have none for those in group day-care centers. Many states have no requirements at all for the aides who are in daily contact with the children, but some have recently revised requirements to specify either high-school graduation or that the applicant be working toward a high-school equivalency program.

In general, where standards are set, social workers and elementary-school teachers have found themselves often closed out of day-care director or group-leadership jobs for lack of early childhood education certificates or degrees. On the other hand, as federal funds become increasingly important the Federal Interagency Day Care Requirements could prevail, specifying that:

- The overall program director might have experience and an advanced degree in one of several fields (early childhood education, social work, psychology, etc.).

- The director of education has an early childhood education degree and relevant experience.

- The director of social work has a social-work degree and relevant experience.

- The teachers have degrees in early childhood education or nursery or kindergarten teaching and relevant experience.

- The nutritionists have appropriate B.A. training and the career-development director has one of several degrees.

- The teacher aides have appropriate informal experience and personality.

Yugoslavia

Programs include a range of staff such as teachers, nurses, physicians, and physician assistants. An average children's nursery would have 1 nurse for every 12 children. An average kindergarten would have 1 teacher for every 20 children.

XI

STANDARD SETTING

The consistent theme, common to all countries, is that standards and regulations exist, but they are standards to aim at rather than ones that are consistently achieved. However, France, the F. R. of Germany, Poland, and Sweden appear to do more about implementing standards and monitoring and regulating programs than do Canada, Israel, the U.K., the U.S., and Yugoslavia, where such implementation is repeatedly described as being nowhere near adequate. It is of course impossible from an outside perspective to compare enforcement rigor.

Canada

Child-care-program standards are set by provincial governments and vary accordingly. In Ontario, legislation provides minimum standards for licensing but inadequate means for implementing or enforcing the standards. The legal standards seem to provide health and safety features, but for many other aspects, such as nutritional menus, there are only persuasive powers, not real control.

France

All private and public institutions involved in the care, protection, or placing of children aged 0-6 are under the supervision of the regional director of the Action Sanitaire et Sociale (under the Ministry of Health and Social Security). This supervision includes responsibility for the following:

- Description and standards regarding equipment and facilities.

- Standards regarding the opening of programs.

- Qualification requirements, ratios, training, etc., regarding staff.

- Health and medical supervision of children.

- Administrative measures.

- Standards regarding physical premises (e.g., size, safety).

Plans for the construction of new facilities are subject to architectural, medical, and cost review by the responsible ministry.

Childminders are licensed by this office also, authorization being granted after a survey is made (by a social worker proving that the morals of the person, the state of her home, and her capabilities to rear children are satisfactory. She must undergo a medical checkup, first, before further assessment occurs.)

Family day care is also responsible tc a medical practitioner, who examines each child on registration and at regular intervals thereafter.

Federal Republic of Germany

Child-care programs like all social services are under both public- and voluntary-agency authorities. Specifically, they are subject to the authority of both public youth-welfare services and the welfare associations of voluntary agencies, in each state, and are subject to regular inspection by the youth offices of the states. Training of professional staff in kindergartens and day-care centers is also regulated by the individual states. The Ministry of Culture (Education) in each state provides two categories of training programs, one a 4-year program for certified "socio-pedagogues" and the other a 3-year program for certified "educators." Other regulations and standards include:

- Minimum floor space (between 1-2 square meters per child to reach 2.8 by 1980 and 3.5 by 1985).

- Minimum number and types of rooms and facilities.

Israel

The Ministry of Social Welfare is responsible for implementing regulations and standards regarding day-care centers as well as issuing licenses and supervising physical, medical, and educational conditions. Here, too, these are described as standards to be aimed at rather than consistently achieved. Thus, for example, 43 percent of the day-care centers are currently described as located in "unsuitable" buildings.

Similarly, with regard to kindergartens, for 10 or more children, conditions for registration, licensing, maintenance, and administration are set by the Ministry of Education, the office responsible for supervising these programs. A public kindergarten class may contain a maximum of 35 children; it must have at least two rooms of 52 square meters and a playground lot.

Poland

The basic facilities and activities of nurseries are controlled, regulated, and supervised by the Ministry of Health and Social Welfare. Similarly, kindergartens are inspected and supervised by experts in the Department of Education as well as by those of the Association of the

Friends of Children (the major voluntary child-welfare organization). For each category there are minimum requirements as to physical space (e.g., 6.8 square meters for each kindergarten place), types of facilities, and maximum numbers set for the whole facility and for the classes or groups within each program.

Sweden

The National Board of Health and Welfare publishes "advice and instructions" on how local government and other authorities responsible for preschool activities can best arrange these programs. It represents the center of inspecting authority (with policy implemented by local child-welfare social-service committees) with regard to location of centers, physical standards, staffing ratios and qualifications, fees, program coordination with school system, etc. For example, current standards for centers include a minimum requirement of 50 square meters (540 square feet) and a more desirable standard of 80 square meters (860 square feet) per facility.

United Kingdom

The Department of Health and Social Security imposes standards regarding facilities, staffing, and programs that are common to childminders, day nurseries, and play groups. For a childminder to be registered, she must be caring for not more than 3 children under 5 years of age, including her own, or not more than 7 children if she has a full-time assistant. She must meet certain health requirements and have not made any "private" informal child-caring arrangements; the premises should be "safe and adequately maintained"; there should be "adequate arrangements for feeding the children" and "an adequate and suitable diet." Most of this wording is very vague and local authorities determine individually the precise conditions of registration. These vary considerably, some authorities taking the view that it is better to register minders even if they provide inadequate care. Once registered, minders can be inspected regularly by the local authority. The range of quality of childminders is enormous. However, the powers of local authorities to ensure high standards are limited and only rarely backed up by a resource commitment. Although an unregistered childminder is acting illegally, the risk of prosecution is slight. This is partly because a great deal of childminding occurs unknown to the authorities, but it is also the result of the authorities' reluctance to prosecute. This occurs because prosecutors may get rid of individual minders, but in the absence of alternative provision, illegal minding continues - the child is simply placed with another minder.

The Department of Health lays down desirable standards for day-nursery (day-care) accommodation in terms of the number of rooms, the square footage per child, and the toilet and cloakroom facilities. But since very few nurseries are built specifically for this purpose it is unlikely that these standards are met with any regularity.

The physical and staffing standards of maintained nursery schools and classes are laid down by the Department of Education, but as in the case of day nurseries, they are standards to aim at rather than ones that are consistently achieved.

United States

Federal government standards exist with regard to day-care programs; however, it is generally acknowledged that they are inadequately implemented and rarely monitored. Nonetheless, it is also the consensus that center-care standards are higher than those for family day care and are better enforced. Furthermore, 90 percent of all day-care centers are licensed; fewer than 10 percent of family-day-care homes are. States have their own requirements for staffing, physical facilities, and program components, and some of them do regulate and monitor more rigorously than others. It is acknowledged that the federal government role in licensing should be advisory but that regulations tied to funding can be of great influence.

The Federal Interagency Day Care Requirements prescribe specific regulations regarding the grouping of children; licensing; location and suitability of facilities; educational services; social services; health and nutrition services; training of staff; parent involvement; and administration, coordination, and evaluation. As modified in June, 1975, educational services under the Requirements are only "recommended." The required staffing standards for children under age 3 in day-care centers and group day-care homes are: 1 adult for each child under 6 weeks of age; 1 adult to 4 children, ages 6 weeks through 36 months. (States may, at their option, require fewer children per adult.) Required staffing standards for school-age children in day-care centers are: at least 1 adult to 15 children, ages 6-10; and at least 1 adult to 20 children, ages 10-14.*

The Child Welfare League of America issues a set of standards for day-care services in 1960, which were revised in 1969. The League and Interagency documents provide the major criteria by which child-care programs can be evaluated. More recently a coordinating body, the National Council of Organizations for Children and Youth, drafted a model code. There is, in fact, a good deal of overlap and similarity among these several documents.

The Child Welfare League's standards, to illustrate, suggest that the essential components of a day-care service are facilities that are safe and suitable for their purpose; qualified staff; participation of parents; a planned program which ensures individualized care, protection of the child's security, and educational and developmental experiences; health evaluation and supervision; social-work service; and administrative planning and coordination.

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*Federal Interagency Day Care Requirements, as modifed by June, 1975, regulations, are prerequisite for federal financial participation in state/local day-care programs under Title XX of the Social Security Act.

The general criteria against which programs are measured can be summarized briefly as follows. First, all programs are expected to meet state and local licensing requirements. Then, in regard to physical facilities, it is suggested that programs be located in areas which are convenient, accessible, and close to other community resources. In addition to safety and sanitation, it is suggested that facilities have space and equipment for rest, play, and privacy and a range of indoor and outdoor program activities as well as room for a child who becomes ill.

It is recommended that all child-care services provide age-appropriate educational opportunities under trained personnel, family-focused social-service programs, health screening and preventive maintenance, and adequate and nutritious meals. In addition, child-care facilities are expected to provide opportunities for staff training and full parental involvement. Finally, agencies are expected to follow accepted administrative and personnel practices, to coordinate their programs with other community agencies, and to engage in periodic ongoing evaluation.

Some modest state-licensing projects are now being funded. It is generally agreed that there is a trade-off between federal and state regulation enforcement and licensing rigor, on the one hand, and program expansion - or even survival - on the other hand. Inevitably fire and safety standards have first attention, and many program components are examined "flexibly." Federal and state funds continue to subsidize much low-standard care.

Yugoslavia

Standards are set by legislation at the level of the republic and are implemented at local levels. They tend to relate to health and safety requirements (sanitation, kitchen, etc.), space requirements (size of room) and special standards with regard to industry-based programs (the facilities must be protected against pollution and noise).

Each day-care center and each nursery must provide coverage for its area at the rate of 100-120 places per 2,000 inhabitants.

XII

RESEARCH AND EVALUATION

At the present time, no systematic, comprehensive, comparable review of research in the countries covered is feasible.

First, most countries (other than the U.S.) have not emphasized research assessing the impact or outcome of child-care programs or evaluating effects of different types of programs. In general, countries have proceeded with their current child-care policies on the assumption that such programs are clearly necessary and desirable because:

- More and more mothers of young children are working and wanting, needing, and demanding child-care arrangements.

- The rate of use, in particular for preschool programs, is extremely high wherever available, with waiting lists in every country regardless of the extent of coverage and regardless of whether the children have working mothers or not.

Second, the predominant form of research in the countries studied is a survey of child-care needs and resources. All countries have completed some studies of need, available resources, and patterns of utilization; however, findings are not comparable because program objectives vary. Clearly, assessments of need, extensiveness, and adequacy of coverage will vary depending on whether major concern is with children of working mothers only, all children of a particular age cohort, or some other group.

Furthermore, these differences in program objectives have other implications for research: For example, countries stressing the "care and protection of children of working mothers" define extent of coverage as the only major focus for study. Countries stressing cognitive development and compensatory education for children from socio-culturally deprived families may be interested in assessment of impact; however, implementing such research requires a time frame far longer than the experience in these programs can provide. For those countries in which socialization is an objective (and this is true for a few countries only, and only in recent years), there is as yet no consensus regarding good outcome measures.

A third form of research, the study of child development, does exist in many of the countries covered, but the studies themselves generally derive from interest in basic behavioral theory and are not specific to child care per se. Thus, some of the country reports include mention of such studies and others do not.

XIII

THE CURRENT DEBATE IN EACH COUNTRY

In reviewing the major issues discussed in each country report, we were struck by the consistency with which certain general themes emerged. The specifics may vary from country to country, but in each the debate tends to cluster around six general topics, which vary in importance. We have conceptualized these as follows:

#1 - The problem of multiple, unclear and/or conflicting objectives.

For example,

- Should child-care programs be designed and operated to meet children's needs, parents' needs, or both? If both, what happens when there is conflict?

- Are organized child-care programs designed to compensate children for socio-cultural deprivation of family and home, or just to take good care of them while mothers work?

- To what extent are consequences of multiple objectives understood and the potential for conflict recognized?

#2 - The difficulty in identifying criteria for resource allocation and priorities for program development.

For example, should available funds be invested in supplementing programs for school-age children, in expanding preschool care for children aged 3-5, or in expanding care for infants and toddlers (those under 3)? For center care or for family day care?

Clearly such decisions are contingent on the earlier debate as to objectives. They may also be contingent at least in part on data not now available (e.g., which objective is most valued, which program is most likely to achieve this objective, at what cost?).

#3 - The extent of unmet need (or demand) for child care.

For example, although no participating country sees existing provision of child-care programs as adequate in quantity (let alone quality!) to meet existing needs, the definitions of need, parameters, and criteria vary. Certainly such definitions are also contingent on the objectives or functions of child-care programs and influence or determine whether "need" is equated with places for

- All children under compulsory school age (C.S.A.).

- All children between the age of 3 and C.S.A.

- All children under C.S.A. who live in certain communities - or in certain types of families.

- All children (under C.S.A.) of working mothers, and whether such places are to be in group programs, in family-based care, or some combination.

Related to this is what is known about user or consumer preferences and whether they are taken into consideration in assessing need.

#4 - The relationship of organized child care to other policies - programs - systems.

For example, is child care a specialized type of program to be developed and operated independently of all other children's programs? Is it part of the child-welfare system generally, or the health system, or the education system? Is it an integrating system, providing the fulcrum for a child-caring system ensuring health care, mental health care, nutrition, etc., for all children? Or is it one component of family policy generally, to be integrated into the broader spectrum of good social policy for families and children and to be fitted into a wide range of overall social provision for families that would include some appropriate balance among income supports, housing, health services, employment, social-insurance benefits, and social-service supports for families as well as alternative forms and approaches to child care?

#5 - The structure and nature of child-care programs.

Included under this topic are such questions as

- Which ministry or department should be responsible for child-care programs: welfare, health, or education? Only one or more?

- What should be included in good program curricula? Should stress be placed on one or more of the following: learning skills; general cognitive stimulation; and opportunities for socialization and companionship? (Clearly this relates to the first issue, what the purpose of the program is.)

- What kinds of standards should there be (physical space, facilities, program time frame or hours of care, staff-child ratio, and staff training and qualifications) and how should these be enforced?

- What should be the method of financing these programs? For example, direct support of the programs themselves (of the care providers)? Indirect support by aiding the users? (E.g., vouchers, for obtaining care at the user's option, tax deductability of the expense of child care, or supplementary child-care allowances for low-income working mothers.)

#6 - The future direction for child-care programs: What is planned, projected, stressed (and why)?

The issues specific to the debate in each country follow. Not every topic is important in each country, nor is the hierarchy of importance the same from country to country. These variations in emphasis and concern will be indicated, as relevant.

Canada

Current debate in Canada is focused on: first, the "multiple, overlapping, and occasionally conflicting objectives" of child-care programs. The traditional social-service function stresses the care and protection of deprived children and leads to the kind of stigmatized programming that characterizes much of traditional day care today and in the past. Education is the major objective of preschool programs, but provision is limited and not secure; and education and cognitive stimulation is only beginning to be included as an objective in day-care programs generally. There is some beginning discussion of the importance of the socialization and developmental functions of child care. When day care was perceived only as a social service and preschool as an educational program, this functional distinction was more easily maintained; however, the increased stress on two other objectives (the economic function of child care and its use as a means for facilitating the entry of women into the labor market; and maximizing women's choice regarding remaining home or working) has resulted in confusion and conflict.

If child-care programs are needed to permit mothers to work if they wish or to facilitate such work (not just to care for children from inadequate families), then, the debate goes, not only is the care function essential, but so are those other objectives that relate to optimum child development and preparation for compulsory schooling.

Since there are no hard data yet available regarding the impact of different types of programs on cognitive development, and there is some concern about the effect on young children of substitute care, the current priority in Canada is for programs stressing the custodial or care and protection function. However, extensive use of kindergartens (where available) by children of middle-class families who want an education focus and similar use of informal care arrangements as provided by relatives or friends for very young children reveal some different preferences among the consumers of child care. The debate continues over which age group (0 to 3 or 3 to 5) and which type of care (custodial or educational) should be given priority, considering the need to allocate scarce resources. There is less debate, as yet, about group or family-based care.

Because child care tends to be dichotomized in Canada between custodial programs and educational programs, definitions of need are similarly separated. On the one hand, "day-care" places are needed for children assumed to be in need of care: children of working mothers and children of deprived families. On the other hand, there is some similar need to expand "preschool" programs for children close to compulsory school age.

Other issues of importance are related to the structure and composition of child-care programs: the extent to which programs should incorporate some cognitive and social development components; the types of programs needed; the kinds of standards required to provide high-quality programs; staffing ratios; and costs of programs (and the composition of the cost), to be paid by whom, and at what fee?

There is some slight discussion of the relationship of child care to family policy generally, in particular around the development of flexible working schedules which would facilitate an easier combination of the nurturing role (child care) with out-of-own-home employment, perhaps on a more equitable, shared basis between both parents.

Future Directions

At present, Canada seems to be moving toward the establishment of a universal kindergarten (preschool education) program, for 4-6 year olds, and a somewhat expanded day-care program stressing the custodial function with some supplementation, for 3-5 year olds who are either children of low-income working mothers or deprived (socio-economically and culturally) families.

France

Although the objectives of child-care programs are clearly and consistently defined, there is some emerging concern for supplementing the traditional functions of care and protection for children under 3 and education and socialization for children aged 2-6, with measures to maximize choice for women. This more recently identified objective does not conflict with existing ones, because the French tend to view child care within the broader context of family policy. It is this subject - the place of child care in family policy generally and the appropriate balance between out-of-own-home care and social benefits and supports and provision for in-own-home care by mothers - that is the source of much current debate. Among the legislation recently introduced is a bill permitting compulsory schooling to begin at age 4, in order to provide compensatory education and programs for all children from deprived families, without singling them out from among children generally. Other pending legislation includes the following: a bill that would permit deductions for child-care expenses from the taxable income of working mothers; a bill that would provide for paid sick leave for working mothers if a child is home ill; recommendation for increasing the amount (and the basis of eligibility) for the single-wage-earner allowance provided families where the mother stays home and chooses not to work.

France tends to define need very broadly: for crèches or family day care for the very young child - adequate places for all children of working mothers or deprived families; for children aged 2-6 - adequate places for all wanting participation in such programs. There is some debate about the appropriate allocation of resources for group care or family day care (in particular, supervised family day care) to meet the needs of the under 3s. Consumer preferences vary and in part reflect some class bias with working-class mothers preferring unsupervised family day care. However, the current demand for kindergarten programs for 2 year olds and over far exceeds the demand for day care or crèches for the younger child. Finally demand for before- and after-school programs has increased sharply also in recent years and is considered of particular importance in France, in the context of meeting the needs of working mothers.

A third major issue now being debated is the dichotomy between the crèches, with very small groups and high staff-child ratios, and the écoles maternelles, with large groups and very low staff-child ratios (1:40, or 45). A related issue is the problem many children have in adjustment when first entering elementary school and the high percentage of children failing the first grade (25 percent). There is much discussion about the lack of continuity and coordination among these programs, in particular the sharp cleavage between crèches and kindergartens and the somewhat strenuous and unsupportive environment which kindergarten programs now provide for the 2 and 3 year olds.

The usual issues regarding program content and standards for ensuring good care are also discussed, with particular concern expressed about the inadequate quality of informal family day care, the extensive use of "clandestine" care (for under 3s, in particular), and the difficulty in enforcing standards and regulations even for licensed but unsupervised family day care.

Future Directions

France's plans for child care place priority on the provision of a comprehensive, universal, voluntary kindergarten program for children aged 2 and older. Also stressed is expanded coverage for younger children in both center and supervised family day care (crèches familiales), expanded before- and after-school coverage, as well as expanded social benefits and supports for alternative approaches to child care.

Federal Republic of Germany

Although the custodial function has been primary in German child care programs, the increased employment of mothers and the growing recognition of the importance of early educational training have added to the functions of child-care programs at the same time as they have significantly increased the demand for preschool programs. Within the last few years there is growing discussion about the importance of the educational component in preschool programs.

Current debate is focused on the need for expanded provision for children aged 3-6. There is some discussion of, and experimentation with, family day care for younger children and interest in whether it can be implemented without impairing child development. Concern is expressed regarding continued overemphasis on the custodial function in kindergarten and the need for increased educational content. One approach to redressing this imbalance is reflected in the discussion about which ministry is appropriate to house the kindergarten programs, with some groups urging that they be placed under the joint aegis of the Ministry of Culture (which would be responsible for the curriculum in the kindergartens) and the Ministry of Social Affairs (which would continue to be responsible for facilities, general regulations, and other program components). This aspect of the debate reflects an emerging interest in developing a stronger educational component in these programs.

Future Directions

Discussion of future plans include the suggestion that compulsory schooling begin at age 5; that there be a specially designed entry program for the first 2 years, for 5 and 6 year olds; that there be a sharply expanded, universal, voluntary program directed at all 3-4 year olds; and that the whole program be placed under dual ministerial responsibility (see preceding material) and integrated into the general educational system.

Israel

Debate in Israel is centered around issues related to program objectives, resource allocation and priorities, and program structure and content.

Child care is expected to serve a complex, complicated, and potentially conflicting series of objectives meeting the needs of both mother and child: It is to compensate for social and cultural deprivation; to prevent subsequent learning problems in school when the child is older; to provide early companionship and socialization opportunities for the child; to facilitate entry of women into the labor force; and to ease the burden of women at home. In an effort at meeting these disparate and sometimes conflicting needs, the programs are established and operated under the aegis of 3 different ministries; yet because of the inevitable overlap among functions, such administrative "splitting" tends to add to the confusion and complexity rather than reduce it.

In order to achieve these objectives, Israel has supported a program of massive educational intervention for 3-5 year olds (compulsory schooling begins in Israel at age 5). One current criticism is that although almost 90 percent of this age cohort is enrolled in kindergarten, a particularly high percentage of those not enrolled are children of deprived families - the major target group for this program.

A second, and more important, issue now being debated relates to the criteria used for resource allocation. Critics of the current program contend that there are no real data regarding the effectiveness of this approach and no justification for concluding that early educational intervention will indeed eliminate cultural deficits. One question raised is whether the large investment in these programs is warranted considering the paucity of evidence supporting the approach, the length of time needed to validate it (estimated at 10+ years), the high-risk element, and the alternative need and pressure for expanding public-school programs beyond the 10th grade. (A related criticism regarding these programs is that too large an investment goes toward construction of facilities rather than toward services and program content.) Regardless of the debate, the ideological and value commitment of most Israelis appears to assure continued support of this approach despite the absence of data supporting it (a position that is fairly characteristic of many countries).

A third major issue debated is the administrative structure of the child-care system described previously. Divided responsibility among the three ministries has raised the following problems:

- Overlapping and duplication among programs.

- Lack of coordination among different types of programs because the inter-agency committee established to coordinate the work of the ministries has no real authority over the component ministries.

- Related inability of this committee to control the voluntary agencies playing the dominant role in establishing and operating day-care programs because of the absence of any uniform policy on the part of the ministries towards these agencies.

Other issues of importance relate to the nature of the programs: the inadequate quality of care, in particular the shortage of trained, professional staff (worse in day-care programs than kindergartens); the problem of enforcing standards; and the conflict over program curriculum: Should kindergarten stress skill training (learning skills for participation in a competitive school environment) or general cognitive and social development? Although there is discussion, and some emerging support for the latter approach, the former still gets priority.

Finally, the method of financing day-care programs is under discussion, in particular the fact that so much money is being channelled into the voluntary sector and that public authorities cannot effectively control the location, eligibility criteria, clientele served, program content, and standards as they could with publicly administered programs.

Future Directions

The stress in Israel is on expanding kindergarten coverage to 100 percent of those children aged 3 and over, so that all children needing or wanting participation will have a place. There is some planned expansion of programs for children under age 3 also.

Poland

In Poland, debate is focused on the inadequacy of existing coverage and the need for expanded programs, on the "disharmony" between kindergartens and elementary school (and the need for reforming elementary-school programs, making them less didactic), and on various aspects of program standards and content. The particular aspects discussed include the need for improving the quality of both day-care and kindergarten programs, increasing the number and ratio of staff, upgrading training, and revising program content to include more material relevant to cognitive and social development.

Future Directions

The primary stress for future program development is on preschool kindergarten programs for all children over 4.

Sweden

The major debate in Sweden relates to the difficulty in achieving the agreed upon objectives of child care: care and protection, socialization, and development and education of children, on the one hand, and the maximizing of women's options as well as parental sharing of child nurturing roles, on the other hand. It is officially stated that "the responsibility for the upbringing, supervision, and care of children rests chiefly with the home; however, community resources are defined as essential supplemental supports." The child-care program is supposed to meet not only a wide range of need of children and working mothers but also provide an instrument for achieving more equal status for women. Some strain arises from attempting to meet both categories of need: children's and parents'.

In addition, the concept of an integrated child-care system designed to carry major responsibility for a wide range of social provision for children (to be the fulcrum for health and mental health services, for example) is difficult to implement also. And this is where the debate is: Coverage is still considered inadequate, and differences exist as to whether center or family day care is preferable and as to the rate at which programs shall expand. There is discussion about the age at which coverage should be complete (6 now, moving toward 5, but giving priority to physically, mentally, and socially handicapped children aged 4 and over); staffing qualifications, experience, training, and staff-child ratios; staff turnover; and the low level of parent participation.

The second major area of debate relates to the complementary relationship between child care and family policy generally and the need to develop adequate social benefits, supports, and policies generally - not to provide alternatives to out-of-own-home child care as is the purpose in some countries, but to support the same objectives as organized child care, from another vantage point.

Future Directions

Current stress is on expanding programs to cover all children on a universal, voluntary basis, beginning with the last year before compulsory schooling begins (age 7) and gradually covering younger children. Immediate priority also is being given those categories of handicapped children mentioned previously, from age 4 on.

United Kingdom

There is some debate at present in Britain regarding differences in what should be - not what are - the objectives for child-care programs. Historically, there has been a division between day nurseries (day care) as a welfare program and nursery schools (kindergartens) as an educational program, and this distinction is still maintained. With a falling birth rate and additional capacity now available in existing educational facilities, support for expanding preschool programs is readily available. However, the debate is among conflicting viewpoints: The social-welfare perspective stresses day care as a resource for helping families and an alternative to residential care and wants this form of provision expanded. Others believe that preschool programs can compensate for disadvantaged families and environment and stress kindergarten programs. Still others believe that kindergarten is essential for the optimum socialization and development of all children, not just those with special needs. Regardless, the steadily growing number of working mothers and groups supporting their position complain that the projected expansion of kindergarten programs is only for part-day care and does not meet their needs.

Thus, the questions raised include:

Should child-care programs be designed to meet the needs of children, of parents, or of both? If both, where there is conflict which should take priority and why?

The theory in Britain is that child care is provided to support the family in its child-caring role, not to substitute for it unless the family is inadequate in meeting its normal functions.

A second issue debated is that if public child-care policy is to support the family in its child-caring role, why view this function solely in the isolated context of organized out-of-own-home child care? Instead, why not view it within the broader purview of family policy generally, along with income supports to parents raising children, construction of multiple housing units with social amenities facilitating and enhancing household care and management and child care for working mothers, legislation enacting more flexible working schedules, and social supports for parents? Why not expand social benefits sufficiently so that mothers can keep children under age 3 with them at home if they wish, provide good out-of-own-home care for mothers who wish to work, and provide extensive programs ensuring companionship and intellectual stimulation for 3 and 4 year olds?

Resolution of a third issue is contingent on some agreement as to objectives because here debate is focused on priorities for resource allocation given the current restrictions on public expenditure. Among the questions raised are: What should the appropriate balance be between preschool (nursery schools) and school-age programs, between full-day and part-day programs, and between caring for children from "normal" circumstances and children from a "deprived" background and/or environment? Given the high cost of day-care facilities and the current shortage of places should family day care be expanded as a less costly program? Considering the growing numbers of working mothers and the increasing demand for all-day care, is the projected expansion of part-day preschool a satisfactory solution?

Other issues currently debated include: the lack of coordination between day-care and preschool programs (in part because they are responsible to two different ministries); the need for increased flexibility in existing programs (e.g., nursery schools to provide extended all-day programs as needed and to make their facilities available to play groups and on school holidays); and the need to improve - and enforce - standards for family day care.

Future Directions

Finally, although the current plan is to expand preschool coverage to cover 90 percent of children age 4 and 50 percent of the 3 year olds in part- or full-day care by the early 1980s, it is noted that "eventually there should be nursery places for all children whose parents wish them to attend from the beginning of the school year after the age of 3." Furthermore, "...the demand for out-of-school facilities and programs for children particularly during the school holidays is even greater than that for pre-school facilities," but no such program development is currently projected.

United States

The major debate in the U.S. relates to the multiplicity, unclearness, and conflicting objectives of child-care programs. Debate fluctuates among (1) a commitment to child-care arrangements so that "welfare mothers" may be trained and/or compelled to work, (2) assurance of good care arrangements for children of mothers who do work but cannot command such care in the marketplace, (3) development of compensatory educational programs to eliminate or reduce the deficits of children of deprived families, and (4) the espousal of universal availability of day care as prerequisite to the maximization of choices for women and, thus, the increased equality of the sexes.

Related issues include those involving priorities for resource allocation and extent of unmet need for care. These are contingent on further clarification of objectives for care but include such other issues as:

- Quality child care under existing models is very expensive and there is no evidence that such programs produce readily verifiable and large growth results in children, although they are probably helpful.

- Sustained and significant effects probably depend on ongoing service in health, income, housing, nutrition, and family and community supports as well; and this range of provision is costly and complicated to implement.

- Work requirements and attendant day care clearly do not cut welfare rolls significantly and the cost of such care (especially for more than one child) is much higher than the potential earnings of unskilled women. Yet more and more women from all socio-economic strata are working and pressuring for expanded, accessible, good quality care.

- Parental preferences among the nonpoor do not necessarily run to the type of programs currently sponsored by public policy.

A third area of debate relates to the place of child-care programs in the context of broader social policy. Beginning with agreement that the family has primary responsibility for child care, proponents move toward one of two approaches. One alternative stresses the use of child-care programs as an integrating system, providing health, mental health, and nutrition services along with opportunities for training and other forms of participation for parents, in addition to the core-program components of care, education, and socialization. The other view sees child care as a discrete and limited program form, offering activities essential to the daily experience. The proponents of this view see a stress on wide-ranging, all-encompassing "developmental" child-care programs as a diversion from major social policy efforts that would encompass income support, health services, employment, and housing as well as tax and social insurance benefits for in-own-home and out-of-own-home child care, as appropriate for all families and children - not just to benefit the small number of children in care. Moreover, these critics say, overloading child-care programs with this multiplicity of social responsibilities not only results in skewing the benefits towards children in these programs (and why are these more needy than those in family day care or those cared for at home?) and diverts attention from major social policy issues, but so burdens child-care programs with expensive ancillary program components that needed expansion would be impossible to implement.

Additional questions have been raised about such major issues as: What systems - social welfare or education - should be responsible for child-care programs generally, and on what basis should such responsibility be assigned? Should the delivery systems - the administration and operation of child-care programs themselves - be under public or voluntary auspices? (Should local government operate child-care programs directly or through purchase of services from voluntary agencies?) What should be the relative roles of professionals, paraprofessionals, and parents? And among professions and disciplines, what should be the relative role of general teacher training, specialized early childhood education, and social work?

Other issues discussed include: the need for more accurate data regarding child-care needs and resources and accurate data regarding existing kindergarten and nursery-school places and numbers of children now covered by such programs; more flexible approaches to using family-centered, formal and informal child-care resources; upgrading family day care and implementing and enforcing standards for both family- and center-based care, in particular, family day care; better data concerning the effects of different staff-child ratios; and alternative approaches to funding (e.g., supporting users through vouchers or tax deductions instead of supporting providers, as has been customary).

Finally, discussion in the U.S. reflects concern about the existing multiple and fragmented systems of child care:

Head Start - for poor children

Day care - for children of low-income working parents, welfare-trainee parents, and parents with problems (physical or mental illness, or some difficulty leading to incapacity in child rearing, neglect, or abuse).

Nursery schools - for children of middle- and upper-income families.

Kindergarten or preschool programs in the public schools - for children 1-2 years below compulsory school age who are fortunate enough to live in communities providing such programs.

Future Directions

The outcome of child-care program development is not yet clear in the U.S. and would appear to be dependent on the consequences of two recent developments:

- A falling birth rate, increased capacity of existing educational facilities and unemployed teachers, and the consequences of these developments for a possible expansion of preschool programs.

- The new legislation (Title XX, Social Security Act) which will permit decategorization of programs and facilitate more consistent planning and program development.

Yugoslavia

In Yugoslavia, debate is focused on the inadequacy of existing coverage and the need for greatly expanded programs.

Future Directions

The primary stress for future program development is on expanding preschool coverage for all children aged 4-7 whose mothers work or who need such programs for other reasons.